

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6380

Account Name

: MACFARLANE FERGUSON & MCMULLEN

Account Number : 076077001654 Phone

: (813)273-4304

Fax Number

: (813)273-4396

REGISTERED AGENT CHANGE

BJR LAND, INC.

Certificate of Status	0
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Status statement of change is submitted for a corporation organized under the laws of the State of Floridging in order to change its registered office or registered agent, or both, in the State of Floridging	da		
1. The name of the corporation: BJR Land, Inc.			
2. The principal office address: 201 North Franklin Street, Suite 2000, Tampa, Florida 33602			
3. The mailing address (if different):			
4. Date of incorporation/qualification: 10/20/05 Document number: P05000142	2647		
The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)			
Hubert Allen Deceased	:::::		
18460 Boyette Road	THE TOTAL PROPERTY OF THE PROP		
Lithia Florida 33547-1715			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	AN 9: 09 REFLORING		
Stephen H. Reynolds, Esq. 201 North Franklin Street	96 88 88 88		
Suite 2000	***		
(P.O. Box NOT acceptable)			
Tampa, Florida 33602			
The street address of its registered office and the street address of the business office of its reg as changed will be identical.	istered agent,		
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.	cer so		
Bandy Allen S	ecrolon Transpre		
(Signature of an officer or director) Randy Allen (Printed or typed name and title)			
I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complet of my duties, and I am familiar with and accept the obligation of my position as registered age document is being filed merely to reflect a change in the registered office address, I hereby co corporation has been notified in writing of this change.	e performance ent. Or. if this nfirm that the		
(Signature of Registered Agent) (Date)			
If signing on behalf of an entity:			
(Typed or Printed Name)			

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)