40700000000357

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
	A. LUNT

500167752105

02/05/10--01008--010 **35.00

FEB - 9 2010

EXAMINER

Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations				
	enewal Limited Partnership p or Limited Liability Limited Partnership			
DOCUMENT NUMBER: A0700000257				
The enclosed Statement of Change of Regifee(s) are submitted for filing.	stered Office and/or Registered Agent and			
Please return all correspondence concerning	g this matter to:			
Shirley Brunet				
Contact Person				
Landon Companies				
Firm/Company				
21 Fast Long Lake Book Suit	to 100			
21 East Long Lake Road, Suit	<u>te 100</u>			
Audress				
Bloomfield Hills MI	48304 \(\bar{\bar{\bar{\bar{\bar{\bar{\bar{			
City, State and Zip Code				
sjbrunet@landoncompan	ies.com eport notification) ARRY SSRY T			
E-mail address: (to be used for future annual r	eport notification)			
For further information concerning this ma	tter, please call:			
Shirley Brunet	at (248) 642-0190 EXT 332 🤝 😈			
Name of Contact Person	Area Code and Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to	o the Florida Department of State.			
STREET ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P. O. Box 6327			
2661 Executive Center Circle	Tallahassee, FL 32314.			

Tallahassee, FL 32301

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

I. FB Wetland Renewal Li				
Name of Limited Partnership or Limited	Liability Li	mited Partnership		
2. 02/02/2007	3.	A07000000	257	
Date of filing/registration in Florida		Florida document n	umber	
4. The name of the registered agent and the registered offic Department of State:	e address as	shown on the record	ds of the Florida	
Corporation Service	e Compa	ny		
· Name				
1201 Hays S	treet			
Address		 		
Tallahassee, FL	34101			
City, State and	Zip			
5. The name and Florida street address of the new registere	d agent and	or office:	1	
Janet Aron	•		2010 FEB -5 SECRETARY ALLAHASSEL	
Name	011		AR AR	•
COS Couls Chara	DI O		ASS.	-
				r
Naples City, State and	FL	34102	AM 10: 54 OF STATE S. FLORIDA	
	•		75 27	
6. Such change(s) is are effective when filed by the Florida	Departmen	t of State.		
Signature of Beneral Partner				
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the provision and I am familiar with an accept the obligations of my positive. Signature of Registered Agent	per and con	nplete performance d		

\$35.00

Filing Fee:

Certified Copy (optional): \$52.50