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**Licensed in Maryland Only

February 23, 2001

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

RE:

RJS, L.L.C. - Change of Registered Agent

To Whom It May Concern:

Enclosed is a Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company. Please note that the mailing address of RJS, L.L.C. has been corrected also. We have enclosed a check in the amount of \$25.00 in payment of the filing fee. Should you have any questions, please do not hesitate to contact me.

Sincerely,

SMK/kgf

Enclosure

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limite	ed liability company is:	RJS, L	.L.C.		
2. The mailing address of Marco Island, Flo		mpany is : <u>2</u>	000 Royal Marco	o Way, Uni	it 310
March 2, 2000			L000000024	407	
3. Date of filing/registrati	on in Florida		4. Document numb	ber	
5. The name of the register Florida Department of	red agent and the regist State:	tered office a	ddress as shown or	ı the records	of the
	Kevin R. Lottes,		<u> </u>		
	4001 Tamiami Tra		Suite 300		
	Naples, FL 3410	Address 3		1 .	
	City, S	State and Zip)	÷ .	_ =
6. The name and address of	of the new registered ag	ent and/or of	ffice:		SECRETOR OF FEB
	Scott M. Ketchu	m, Esq.			
	N 4001 Tamiami Tr	Name ail North	, Suite 300	_	TARY CONTROL
	Florida street address	(P.O. Box N	OT acceptable)	-	PH C:
	Naples	FL 3410	3		RATIC
	City, Sta	ate and Zip			SMS
If the limited liability comconfirmed that after the chand the business office of liability company, it is here the members of the limited the operating agreement of Signature of a member or authorized.	ange or changes are ma the registered agent will eby confirmed that the of liability company or as f the limited liability con	ide, the Florid be identical change(s) was so therwise propany.	da street address of l. Or, in the case of as/were authorized b	the register a Florida lin	ed office mited
, V					
Ray H. Smela (Printed or typed name of signee)	<u> </u>	·		-	
I hereby accept the appoir comply with the provisions and I am familiar with and thapter 608, F. S. Or if the laddress, I hereby confirm (Signature of Registered Agent)	ntment as registered age of all statutes relative accept the obligations is document is being fil that the limited liability	ent and agree to the proper of my positic ted to merely company ha	e to act in this capa r and complete perf on as registered ago reflect a change in us been notified in w	city. I furth formance of ent as provid the register vriting of thi	er agree to my duties, led for in red office s change.
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