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PLAZA MARCHE', L.C. 301 SOUTH CENTRAL AVE. FLAGLER BEACH, FL 32136
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(City/State/Zip/Phone #)
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W6-2981

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 limite liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agent, or both, in the State of Florida.
1. The name of the limited liability company is: Plaza Marché, L.C.
2. The mailing address of the limited liability company is: 301 South Central Ave Flagler Beach, FL 32/36 3/13/2000 L0000002981 3. Date of filing/registration in Florida 4. Document number
3/13/2000 40000002881
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Thomas P. Sheekan Name Name Address Flag la Beach, FL 32136 City, State and Zip
6. The name and address of the new registered agent and/or office:
Margaret D. Sheekan
Margaret D. Sheehan 5306 John Anderson Huy Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
Flagle Beach FL 32136 City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of it Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)
Margaret D. Sheekan (Printed of typed name of signee)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree comply with the provisions of all statutes relative to the proper and complete performance of my dutie and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change

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

FILING FEE: \$25.00

INHS18(10/99)

(Signature of Registered Agent)