L00000006664

LIMITED LIABILITY COMPANY
AMENDMENT AND NAME REGISTRATION (LIMITED)

DOCUMENT # L00000006664

1. Entity Name

D AND P OF PERDIDO KEY, LLC

FILED
2003 AUG -8 PM 3:32
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	P.O. BOX 856
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PERDIDO KEY, FL	City & State: ORANGE BEACH, AL
Zip / Country	Zip: 36561 / Country: US

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3665593 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: STEPHEN B. SHELL

Street Address (P.O. Box Number is Not Acceptable): SEVILLE TOWER, 9TH FLOOR

226 SOUTH PALAFOX STREET

City: PENSACOLA **FL** Zip Code: 32501

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. DATE

FEE IS $50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE	MEMBER mgr	TITLE	800022476278
NAME	BRAD L. PATTERSON	NAME	08/21/03--01018--014 **250.00
STREET ADDRESS	1556 GULF SHORES PARKWAY	STREET ADDRESS	
CITY - ST - ZIP	GULF SHORES, AL 36542	CITY - ST - ZIP	
TITLE	MEMBER	TITLE	
NAME	MOHAMMED R. DASHTI mgr	NAME	
STREET ADDRESS	3065 WOODLAND DRIVE	STREET ADDRESS	
CITY - ST - ZIP	KENNESAW, GA 30152	CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	**DO NOT WRITE IN THIS SPACE**
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	REINSTATEMENT 2001-03
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE Brad Patterson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

CR2E083B (12/02)

STF FL32519F.1