## L 00000010825

(Re	equestor's Name	)
(Ad	dress)	·
(Ad	ldress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number Certificate	
Special Instructions to	Filing Officer:	
·	Office Use Or	
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## 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 limited liability company is: Flor	rida East Coat Railway, LLC
2. The mailing address of the limited liability compa	ny is : 7411 Fullerton St., Suite 300
Jacksonville, Florida 32256	
09/08/2000	L00000010825
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered Florida Department of State:	office address as shown on the records of the
Heidi J. Eddins	
Nar	ne
One Malaga Street	
Addı	ess
St. Augustine, FL 3208	
City, State	and Zip
6. The name and address of the new registered agent a	and/or office:
	7. PS: 7.
Heidi J. Eddins	
Name	lvd., Building 100, Suite 350
	lvd., Building 100, Suite 350
Florida street address (P.C	). Box NOT acceptable) 用。 呈
Jacksonville FL	32256 FG 5
City, State a	
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company.  (Signature of a member of authorized representative of a member)	the Florida street address of the registered office identical. Or, in the case of a Florida limited age(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization

(Printed or typed name of signee)

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 complete performance of my duties, 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.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (8/05)