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SECRETARY OF STATE

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JUN - 1 2011

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporation	ıs					
SUBJECT: Robert F. Johnson Holdings, LLC Name of Limited Liability Company							
Dear	Sir or Madam:						
The e	nclosed Registered Agent	/Registered Office	Change	and fee(s	are submitted for	or filing.	
Please	e return all correspondence	e concerning this n	natter to	the follo	wing:		
	Carter B.			_			
	Name of Pe	erson					
	de la Parte & Firm/Comp			_			
101 East Kennedy Blvd., Suite 2000					·	2011 MAY 3 SECRETA FALLAHAS	MECON
· · · · · · · · · · · · · · · · · · ·	Tampa, Fl City/State and 2	· · · · · · · · · · · · · · · · · · ·		_		2011 HAY 31 PM 124 57 SECRETARY OF STATE ALLAHASSEE, FLORIDA	
Е	cmccain@d -mail address: (to be used for futu	gfirm.com re annual report notificati	ion)			57 TE RIDA	
For fu	rther information concern	ning this matter, ple	ase call:				
	Carter B. McCai	าat (_		_)	229-2775		
	Name of Person		4	Area Code &	Daytime Telephone N	lumber	
	STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, Florida 3230	rcle	Reg Divi P.O.	istration S sion of Co Box 6327	orporations		
	Enclosed is a check for	the following am	ount:				
✓ \$25 Filing Fee			\$5	5 Filing F	ee & Certified Co	ору	

TO:

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. Name of the limited liability company:	Robert F. Johnson Holdings, LLC
2. (a) Principal office address of limited liability	company: 101 East Kennedy Blvd.
(Note: MUST BE STREET ADDRESS)	Suite 2000 Tampa, FL 33602
(b) Mailing address of limited liability compar	ny: 101 East Kennedy Blvd.
(Note: MAY BE POST OFFICE BOX)	Suite 2000 Tampa, FL 33602
10/16/2000	L00000012522
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sh	nown on the records of the Florida Dept. of State:
Registered Agent:	Carter B. McCain
Registered Office Address:	201 North Franklin Street Suite 2000 Tampa, FL 33602
(b) Enter name of NEW Registered Agent and	ω <u>ς</u> ω
NEW Registered Agent:	CF P
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRE)	SS) Suite 2000 FL33602
and the business office of the registered agent will	de, the Florida street address of the registered office be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization
Carter B. McCain	
Printed or typed name of signee	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative t and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being fill address, I hereby confirm that the limited liability Signature of Registered Agent	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office company has been notified in writing of this change.
Signature of Registered Agent	