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Fort Lauderdale Jacksonville Miami Orlando Tallahassee Tampa West Palm Beach Wachovia Center, Suite 1500 100 South Ashley Drive Tampa, Florida 33602-5311

www.akerman.com

813 223 7333 tel 813 223 2837 fax

Deborah L. Evans, Paralegal 813 209 5028 devans@akerman.com

January 23, 2004

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

Re: Tangalakis Family Management, LLC Our File No. 29451-126044

Dear Sir or Madam:

We are enclosing for filing the Statement of Change of Registered Office for the above referenced limited liability company, along with our check in the amount of \$25.00. Please date stamp the enclosed copy and return it to us in the enclosed self-addressed, stamped envelope to evidence the filing of same.

Thank you for your assistance. If you have any questions, please do not he sitate to contact us.

Sincerely yours,

**AKERMAN SENTERFITT** 

Deborah L. Evans, Paralegal

Enclosures

cc: Mrs. Nancy K. Tangalakis

William Kalish, Esq. (w/out enclosures)

## 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: Tangalakis Family Management, LLC 2. The mailing address of the limited liability company is : 2862 Shady Oak Court, Clearwater, FL 33761 11/16/2000 L0000014400 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: William Kalish Name 101 East Kennedy Blvd. Address Tampa, FL 33602 City, State and Zip 6. The name and address of the new registered agent and/or office: William Kalish, Esq. Name 100 S. Ashley Drive, Suite 1500 Florida street address (P.O. Box NOT acceptable) Tampa. 33602 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 a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of 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 mornber or authorized representative of a member Nancy K. Tangalakis, Managing Member

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. The horizontal figures 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.

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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 a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of 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 monther or authorized representative of a member

Nancy K. Tangalakis, Managing Member

(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.

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

**FILING FEE: \$25.00** 

INHS18(10/99)