

L01000002623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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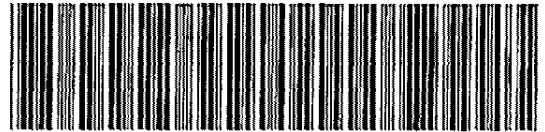
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Duffy's Management, LLC

(Name of corporation)

**DOCUMENT NUMBER:** L01000002623

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert L. Crane, Esq.

(Name of person)

Boose Casey Ciklin Lubitz Martens McBane & O'Connell

(Name of firm/company)

515 N. Flager Drive, 18th Floor

(Address)

West Palm Beach, FL 33401

(City/state and zip code)

For further information concerning this matter, please call:

Robert L. Crane, Esq.

(Name of person)

at ( 561 ) 832-5900

(Area code & daytime telephone number)

Enclosed is a \$25.00 check made payable to the Department of State.

**Mailing Address:**

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

**Street Address:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**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: Duffy's Management, LLC
2. The mailing address of the limited liability company is : 521 Northlake Boulevard, #3 & 4,  
West Palm Beach, Florida 33408

February 20, 2001

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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:

Wilton L. White, Esq.

Name

625 North Flagler Drive, 9th Floor

Address

West Palm Beach, Florida 33401

City, State and Zip

6. The name and address of the new registered agent and/or office:

Robert L. Crane, Esq.

Name

515 N. Flagler Drive, 18th Floor

Florida street address (P.O. Box NOT acceptable)

West Palm Beach, FL 33401

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.

Paul Emmett  
(Signature of a member or authorized representative of a member)

Paul Emmett

(Printed or typed name of signer)

*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.*

Paul Emmett  
(Signature of Registered Agent)

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

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