FILED
Jun 18, 2002 8:00 am
Secretary of State
05-01-2002 91552 013 \*\*\*\*50.00

## LIMITED LIABILITY COMPANY

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DOCUMENT # L01000009383							
TRILEGACY RIVERPARK, LLC							
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1 '	Place of Business	3. Mailing Address				150700	. · · ·
2625 W. 5th Street Suite, Apt. #, etc.		P.O. Box 41064 Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
	onville, FL	City & State  Jacksonville		í	Number -3724221		olied For Applicable
Zip 32254	Country	32203 ···	Country 'USA'	1	tificate of Status Desired	- 33.00 Addi	ionai
		52205	USA	7Name	and Address of Current	Fee Required	
Name					Jamilton Manulos		
DO NOT WRITE				W. Hamilton Traylor  Street Address (P.O. Box Number is Not Acceptable)			
IN THIS SPACE				2625 W. 5th Street			
			City			FL Zio Code 32254	<del></del>
The above named entity submits this statement for the purpose of changing its regi				Jacksonville FL			
	e nomes energy submits ons statement for	trie parpose or changing its r	egistered office	or registered agent,	or both, in the State of Flo	orida.	
Signature: Signature: typoid or profited name of registered agent and rulin if applicable.					· ·		
FEE IS \$50,00						DATE	
Make Check Payable to Department of S							
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9.	MANAGING MEMBER	S/MANAGERS	ти				
NAME	Spence, Carlton H. 2625 w. 5to Street		NAME				270
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	ertify that the information supplied with this on this report is true and accurate and tha ility company or the receiver or trustee en					rther certify that the inform g member or manager of t	ation he
SIGNATURE: 4/23/0Z (904) 486 - 6040							
	PHORATURE AND TYPES OF PRINTED NAME OF SIG	ning managing member, manage	R, OR AUTHORIZED	REPRESENTATIVE	Ohe	Daytona Phone s	(