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| PICK-UP                 |                    | MAIL.       |
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| Certified Copies        | _ Certificates     | s of Status |
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# FIELDSTONE LESTER SHEAR & DENBERG, LLP ATTORNEYS & COUNSELLORS AT LAW

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OF COUNSEL:

ROBERT E. DADY, P.A. ALSO MEMBER N.Y. BAR

LEE J. OSIASON, P.A.

MICHAEL J. ROSENBAUM, P.A.

### August 18, 2004

Florida Department of State **Division of Corporations Registration Section** 409 E. Gaines Street Tallahassee, FL 32399

Gentlemen:

Enclosed you will find Statements of Registered Agent for filing together with a check in the sum \$760.00, representing the filing fees.

If you have any questions, please feel free to contact our office.

Sincerely, toul les Ronal

RRF\cs .

Encls.



### 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: BRAY & GILLESPIE MANAGEMENT, LLC

2. The mailing address of the limited liability company is : P.O. BOX 265400

## DAYTONA BEACH, FL 32126-5400

7/24/01

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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:

|                            | RONALD R. FIELDSTONE                             |        |  |
|----------------------------|--|--------|--|
|                            | Name<br>201 ALHAMBRA CIRCLE, SUITE 601           |        |  |
|                            | Address<br>CORAL GABLES, FL 33134                |        |  |
|                            | City, State and Zip                              | 2004   |  |
| 6. The name and address of | of the new registered agent and/or office:       | ALLA   |  |
|                            | CHARLES A. BRAY                                  | HAR IS |  |
|                            | 600 NORTH ATLANTIC AVENUE                        | SORP L |  |
|                            | Florida street address (P.O. Box NOT acceptable) | FLORA  |  |
|                            | DAYTONA BEACH FL 32118                           | RIDA 5 |  |
|                            | 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 member or authorized representative of a member)

harles A. Bray (Printed or typed name of signee)

(Signature of Registered Agent)

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**