LD1000012460

(Re	equestor's Name)	
(Ac	ldress)	
(Address)		
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE
AND ASSEE, FLORIDA

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. COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ESTERO Verde Do (Name of Limited	velopment Company L
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Donne WILKELIAM	
Estero Verde Dev. C. (Firm/Company)	<u>o U</u> C
314 Earst Ave	
(City/State and Zip Code)	1108
For further information concerning this matter, please	se call:
Donna Wilkersam. (Name of Person)	239 216 7803 (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amount	unt:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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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: Estero Verde Dev. Co U.C.
2. The mailing address of the limited liability company is: 314 EQLET AVE 7
1 Deles FL 34108
7/27/2001 LG 10000 12460 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:
Address FL 34134 RIVERSON Randy RIVERVIEW Contend Duck ST Address FL 34134 City, State and Zip
6. The name and address of the new registered agent and/or office:
Florida street address (P.O. Box NOT acceptable) Obles FL 34108 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)
(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, Lhereby confirm that the limited liability company has been notified in writing of this change. Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
INHS18 (8/05) FILING FEE: \$25.00 SSEC IS TO BE IN