Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC REGISTERED AGENT CHANGE CLEARWATER BAY INVESTORS, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

T. HAMPTON

Dec 3 0 7011



COVER LETTER

Division of Corporations	
SUBJECT: CLEARWATER BAY INVESTORS, I	TC
Name of Li	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
Michael Sweet	LLC
Name of Person	
Decade Group	ete 8 te
Firm/Company	
13555 BISHOPS COURT SUITE 345	•
Address	
BROOKFIELD WI 53005 US	
City/State and Zip Code	
msweet@decadegroup.com	
E-meil address: (to be used for future somus) report not	fication)
For further information concerning this matter,	, please call:
Michael Sweet	at (²⁶²) ⁷⁹⁷⁻⁹²¹⁵
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section Division of Corporations
Division of Corporations Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following	amount:
□ \$25 Filing Fee	\$55 Filing Fee & Certified Copy
INHS18 (5/08)	·

FLD15 - 11/14/2010 C T Kyston, Galler

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. Name of the limited liability company: CLEARWATER	BAY INVESTORS, LLC	
2. (a) Principal office address of limited liability compan	240 D 4 TENTON	DRIVE
(Note: MUST BE STREET ADDRESS)	CLEARWATER FL 33	767-2503 US
(b) Mailing address of limited liability company:	13555 BISHOP	S COURT SUITE 345
(Note: MAY BE POST OFFICE BOX)	BROOKFIELD WI 5300	05 US
10/24/2001	L01000018374	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Flor	ida Dept. of State:
Registered Agent:	NAPLES-LAWDOCK,	INC.
Registered Office Address:	1395 PANTHER LANE	
	NAPLES FL 34109-7874	
NEW Registered Agent:	C T Corporation System	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> NEW Registered Agent:		
<u>NEW</u> Registered Office Address: [MUST BE FLORIDA STREET ADDRESS]	1800 F .1 W .1 LY	
NEW Registered Office Address: TMUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island I	Road
(MÜST BE FLORIDA STREET ADDRESS)	Plantation	FL_33324
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or suthorized representative of a member	Plantation laws of the State of Flantation lorida street address of ical. Or, in the case of the state of the	FL 33324 orida, it is hereby If the registered office If a Florida limited by an affirmative vote
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If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the changes of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signanted themselve a substitute representative of a member Jeffrey Keinricher Printed or typed name of signoc I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proposition of all statutes relative to the provision of an ignification of my performent of the limited liability company of the provision of the limited liability company of the provision of the limited liability company. Signature of Registered Agent Division of Corporations, P.O. Box 63	Plantation laws of the State of Flantation lorida street address of ical. Or, in the case of was/were authorized wise provided in the address of the state of the	orida, it is hereby f the registered office f a Florida limited by an affirmative vote rticles of organization acity. I further agree to formance of my duties, tent as provided for in in the registered office writing of this flame.