

LO/0000/9987

Requester's Name

GOODLETTE, COLEMAN & JOHNSON, P.A.
ATTORNEYS AT LAW
NORTHERN TRUST BANK BUILDING
4001 TAMiami TRAIL NORTH, SUITE 300
NAPLES, FLORIDA 34103

02 JUL 26 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. _____ (Corporation Name) _____ (Document #) **500005702826**
-07/26/02--01037--009
*****25.00 *****25.00
- 2. _____ (Corporation Name) _____ (Document #)
- 3. _____ (Corporation Name) _____ (Document #)
- 4. _____ (Corporation Name) _____ (Document #)

AL

- Walk in Pick up time Certified Copy
- Mail out Will wait Photocopy Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

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.

CDL Development, LLC

1. The name of the limited liability company is: _____
2. The mailing address of the limited liability company is: 12644 Tamiami Trail, East
Naples, Florida 34114

3. Date of filing/registration in Florida 11/19/01
4. Document number L01000019987

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

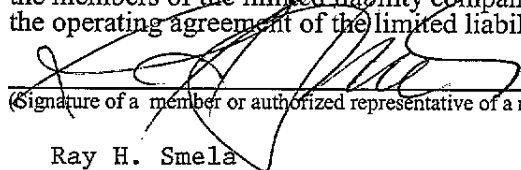
Scott Ketchum, Esquire
Name
4001 North Tamiami Trail, Suite 300
Address
Naples, Florida 34103
City, State and Zip

FILED
02 JUL 20 AM 9:31
STATE
TALLAHASSEE, FLORIDA

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

Richard D. Yovanovich, Esquire
Name
4001 North Tamiami Trail, Suite 300
Florida street address (P.O. Box NOT acceptable)
Naples FL 34114
City, State and Zip

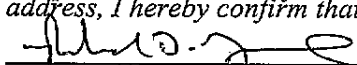
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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)

Ray H. Smela

(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, I hereby confirm that the limited liability company has been notified in writing of this change.


(Signature of Registered Agent)

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