

Division SEP. 28. 2006 3:39PM

GASSMAN, BATES&ASSOC.

NO. 3086 Page 1 of 2

Florida Department of State

Division of Corporations

Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000239422 3)))



H060002394223ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 205-0380

From:

Account Name : GASSMAN & ASSOCIATES, P.A.

Account Number : 075350000514

Phone : (727) 442-1200

Fax Number : (727) 443-5829

RECEIVED

06 SEP 28 PM 3:33

DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

2075 S., L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

9/28/2006

SEP. 28. 2006 3:39PM

GASSMAN, BATES&ASSOC.

NO. 30861+ P. 21x #

H060002394223

**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: 2075 S., L.L.C.
2. The mailing address of the limited liability company is: 1925 SEMINOLE BLVD.,
LARGO, FL 33778

11/20/2001
3. Date of filing/registration in Florida

L01000020066
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:

GASSMAN, ALAN S ESQ.

Name

1245 COURT STREET, SUITE 102

Address

CLEARWATER, FL 33756

City, State and Zip

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

LaVerne Pritchett

Name

1925 Seminole Blvd.

Florida street address (P.O. Box NOT acceptable)

Largo

FL 33778

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.

LaVerne Pritchett
(Signature of a member or authorized representative of a member)

LaVerne Pritchett
(Printed or typed name of signee)

LAVERNE PRITCHETT

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.

LaVerne Pritchett
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

INHS18 (8/05)

Audit Fax # H060002394223

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 SEP 28 AM 11:21