## COMPAGO 20203 Registered Agent Services A Subsidiary of Carlton Fields

ONE HARBOUR PLACE, 5<sup>TH</sup> FLOOR 777 S. HARBOUR ISLAND BOULEVARD TAMPA, FLORIDA 33602-5730 MAILING ADDRESS: P. O. BOX 3239 TAMPA, FLORIDA 33601-3239 TEL (813) 223-7000 FAX (813) 229-4133

June 17, 2002

Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314 800005856308--3 -06/19/02--01025--002 \*\*\*\*\*\*55.00 \*\*\*\*\*\*25.00

01-20203

Re: Registered Agent Statements of Change

Gentlemen:

Please find enclosed statements of change for the registered agents of the following entities:

Lazarus Consulting Services, Inc. The Original Tiki Hut Company LLC Lutheran Services of Florida

Also enclosed is Carlton Fields' Check No. 295463 in the amount of \$95.00 for payment of the filing fees of the above-described statements of change.

Very truly yours,

Joyce F/Bentubo

Administrative Assistant

jfb

Enclosures

TPA#1766803.01

## 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: The Original Tik; Hut Company LLC
2. The mailing address of the limited liability company is: 1011 St. Retersburg Ur.
OLDSMAR FL 33647
LOI ODO 20203  3. Date of filing/registration in Florida  4. Document number
J. Date of filling/logistation in Political
5. The name of the registered agent and the registered office address as shown on the records of the
Floride Department of State:
Name 5 550
<u>Ora Harbour Place, Suite SOO</u> Address
Tampa FL 33602
6. The name and address of the new registered agent and/or office:
CFRA LLC
One Harbour Place, Suite 500, 777 5 Hubour Island
Florida street address (P.O. Box NOT acceptable)
Tampa FL 33602. 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.
LAdie
(Signature of almember or authorized representative of a member)
Vinicent Amodil
(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, Thereby confirm that the limited liability company has been notified in writing of this change.
and I am jamiliar with and accept the obligations of my position as registered agent as provided to the Chapter 608 F.S. Or, if this document is being filed to merely reflect a change in the registered office address 408 F.S. or, if this change in 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
(Signature of Registered Agent)
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314'

**FILING FEE: \$25.00** 

INHS18(10/99)