

# L02000002370

(Requestor's Name)

SOUTH FLORIDA RIDER MANAGEMENT GROUP  
4601 WEST HERRING BLVD. #215  
TAMPA, FL 33609

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
CORPORATION DIVISION  
ON FEB 16 AM 10:17

*Entity must be on our data base  
can't read your writing*



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

January 15, 2004

SOUTHFLORIDA MANAGEMENT GROUP  
4601 WEST KENNEDY BLVD., #315  
TAMPA, FL 33609

SUBJECT: SOUTHFLORIDA MANAGEMENT GROUP LLC  
Ref. Number: L02000002370

We have received your document for SOUTHFLORIDA MANAGEMENT GROUP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

I'm sorry but I can't make out the first word of the company you have listed as the new registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing  
Document Specialist

Letter Number: 304A00002926



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

January 29, 2004

SOUTHFLORIDA MANAGEMENT GROUP  
4601 WEST KENNEDY BLVD., #315  
TAMPA, FL 33609

SUBJECT: SOUTHFLORIDA MANAGEMENT GROUP LLC  
Ref. Number: L02000002370

We have received your document for SOUTHFLORIDA MANAGEMENT GROUP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to sign the acceptance statement for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing  
Document Specialist

Letter Number: 304A00006241

**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: South Florida Management Group, Inc.
2. The mailing address of the limited liability company is : 4601 W. Kennedy Blvd #315  
TAMPA FL 33609
3. Date of filing/registration in Florida 01 31 02
4. Document number L02000002370

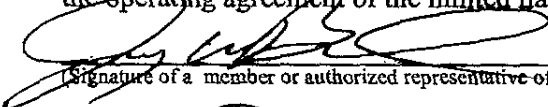
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Corperation Service Company  
Name  
1201 Hays St  
Address  
Tallahassee, FL 32301  
City, State and Zip

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


Jerry Bartlett  
Name  
4601 W Kennedy Blvd #315  
Florida street address (P.O. Box NOT acceptable)  
TAMPA FL 33609  
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)

Jerry Bartlett  
(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

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DIVISION OF CORPORATIONS  
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