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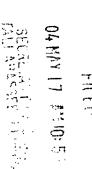
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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WALLIS & WALLIS

PROFESSIONAL ASSOCIATION

Peter E.S. Wallis Joan Martino Wallis 2641 EAST ATLANTIC BLVD.

SUITE 307

POMPANO BEACH, FL 33062

TEL: 954-941-9005 FAX: 954-941-9010

E-MAIL: PETER@WALLISANDWALLIS.NET • JOAN@WALLISANDWALLIS.NET

May 12, 2004 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company.

Document Number L02000021498

Dear Sir/Madam:

Please be advised that the undersigned represents <u>Blue Bayou</u>, <u>Lot 3</u>, <u>LLC</u> in the aforementioned matter.

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company, for Blue Bayou, Lot 3, LLC. and a check in the sum of twenty-five dollars (\$25.00) for the required Filing Fee.

Please feel free to contact me if you have any questions or further requirements. Thank you for your time and attention to this matter.

Cartino Walles/Wof

Regards,

Joan Martino Wallis

Wallis & Wallis

Enclosure

SECRETARY OF STAIL FALL AHASSEE, FLORID

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:		Blue Bayou, Lot 3, LLC		
2. The mailing address of	the limited liability company	is: 900 E. Atlantic Ave., Ste 5		
Delray Beach, FL 3348		hange of address)		
201149 204011, 1 2 00 10	(1110 10 4 01	The second of th	we di departe	
8/21/02		L02000021498		
3. Date of filing/registration	on in Florida	4. Document number		
5. The name of the register Florida Department of S		ffice address as shown on the records of	the	
-	Valvo, Craig I		S PROPERTY THE PARTY OF THE PAR	
	Name 6850 NW 12th A			
Address				
Address Pompano Beach, FL 33309 City, State and Zip				
6 Th	, -,	· · · · · · · · · · · · · · · · · · ·	성 그 끝질	
o. The name and address o	f the new registered agent and	Por office:		
_	Wallis & Walli	is, P.A.	· 🙃	
_	Name 2641 E. Atlantic B	lvd, Ste 307	Fig. 5	
	Florida street address (P.O. 1	Box NOT acceptable)		
_	Pompano Beach, _{FL} 3	33062	. २०१९ , ३०० करास्टर	
	City, State and	1 Zip		
confirmed that after the chand the business office of the liability company, it is here	ange or changes are made, the he registered agent will be ide by confirmed that the change I liability company or as other the limited liability company	ne laws of the State of Florida, it is hereby Florida street address of the registered entical. Or, in the case of a Florida limit e(s) was/were authorized by an affirmative wise provided in the articles of organization.	office ted ve vote of	
Dana Parham				
(Printed or typed name of signee)		<u> </u>	. ⊊. ¥.e., ⊘	
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm to	atment as registered agent and of all statutes relative to the accept the obligations of my its document is being filed to that the limited liability comp	d agree to act in this capacity. I further proper and complete performance of my position as registered agent as provided merely reflect a change in the registered any has been notified in writing of this c	agree to auties, for in office change.	
Signature of Registered Agent)	2 Wallin 4/2	2/04		