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T. CLINE

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**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: THE CALYPSO DEVEL (Name	LOPERS I, L.L.C. e of Limited Liability Company)	-	D
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning	g this matter to the following:		
JOHN P. DANIEL			
(Name of Person)			
BEGGS & LANE, R.L.L.P. (Firm/Company)		2009	-
501 COMMENDENCIA STREET	AHASS	APR-2	
(Address)	CRETARY OF SIAN	2009 APR -2 AM II: 08	
PENSACOLA, FL 32502 US (City/State and Zip Code)		08	
For further information concerning this mat	itter, please call:		
Larry Covington	at ( 678 ) 624-9986	_	
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following	ing amount:		
✓ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

## 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.

the trace of the trace	
1. Name of the limited liability company: THE CALY	PSO DEVELOPERS I, L.L.C.
2. (a) Principal office address of limited liability compan ( <i>Note: MUST BE STREET ADDRESS</i> )	ny: THE CALYPSO DEVELOPERS I, L.L.C.  16470 FREEMANVILLE ROAD  ALPHARETTA, GA 30004
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	THE CALYPSO DEVELOPERS I. L.L.C.  16470 FREEMANVILLE ROAD  ALPHARETTA, GA 30004
09/10/2002  3. Date of filing/registration in Florida	L02000023433 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	GARY B. LEUCHTMAN
Registered Office Address:	501 COMMENDENCIA STREET PENSACOLA, FL 32502 US
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NE</b>	EW Registered Office address:
NEW Registered Agent:	JOHN P. DANIEL
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	BEGGS & LANE, R.L.L.P  501 COMMENDENCIA STREET PENSACOLA  D,FL 2502 US
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles climited liability company.  (Signadre of a member or authorized representative of a member)	eet address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
MERCER WILLIAMS / MGR- SM MANAGER, L.L.C. (Printed or typed name of signee)	<del></del>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the property am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I n as registered agent as provided for in Chapter 608, change in the registered office address, I hereby ed in writing of this change.
(Signature of Registered Agent)	

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

INHS18 (05/08)