L02000026093

(Requestor's Name)					
From: SUSAN G. WHITLATCH (904)301-4460 THE ST. JOE COMPANY 245 Riverside Avenue Suite 500 JACKSONVILLE, FL, 32202 (City/State/Zip/Phone #)					
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2003 OCT 14 PM 3: 47

J. BRYWN OCT 2 3 2003

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 limite	ed liability company is:	BECKRICH OFFICE	BUILDING II, L.L.C.	
2. The mailing address o	-			
245 RIVERSIDE AVE	NUE SUITE 500, JAC	KSONVILLE, FL 3220)2	يد :ب
10/3/2002		L020000	26093	
3. Date of filing/registrat	ion in Florida	4. Docume	nt number	
5. The name of the registe Florida Department of	ered agent and the regis State: LAWRENCE PAINE		nown on the records of th	1e
<i>:</i> –		Name /ENUE SUITE 500		a a
	Address JACKSONVILLE, FL 32202 City, State and Zip		LLAHA	PING OCT
6. The name and address of the new registered agent and/or office:		SSEE.		
	CHRISTINE M. MA	RX	東野 (≇ ⊂ ယ့
		Name aboue		သူ -
. • • • • • • • • • • • • • • • • • • •	Florida street address	(P.O. Box NOT accept	able)	
-	City, S	FL tate and Zip		
If the limited liability conconfirmed that after the cland the business office of liability company, it is her the members of the limite the operating agreement of Signature of a member or author	the registered agent with registered agent with the distriction of the limited liability company or a fitted limited liability control of the limited liability control of a member of a m	ade, the Florida street ad il be identical. Or, in the change(s) was/were autl as otherwise provided in ompany.		cc
(Printed or typed name of signce) I hereby accept the appoint of the provision and I am familiar with an Chapter 608, F.S. Or, if the address, I hereby confirm the confirmation of Registered Agent)		gent and agree to act in it to the proper and comp s of my position as registicled to merely reflect a c y company has been not	this capacity. I further a lete performance of my d tered agent as provided j tered agent as provided j the in the registered of this ch	gree to lutics, for in office ange.

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

INHS18(10/99)

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