LD2000034320

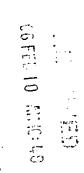
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
}						

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J. BRYAN FEB 1 0 2006



I SERVICE COMPANY				
	ACCOUNT NO.	: 0721000000	32	
	REFERENCE	: 857988	7239973	
	AUTHORIZATION	: Spelsel	nan	
	COST LIMIT	: \$ 25.00		
ORDER DATE :	February 8, 2006	;		
ORDER TIME :	9:39 AM			
ORDER NO. :	857988-255			
CUSTOMER NO:	7239973			
name :	<u>CHANGE OF A</u> ABBOTT & ANDR		C	2006 FEB 10 PM 2: 35
PLEASE RETURN	THE FOLLOWING AS	PROOF OF FILE	NG:	
	FIED COPY STAMPED COPY			
CONTACT PERSON	N: Heather Chapm	nan EXT# 290	8	
		EXAMINER:		

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.

	, o, 1 , 0 , 1 , 1 , 1 , 1 , 1					
1. The name of the limite	d liability company i	is: ABBOTT	& ANDREWS REAL	LTY, LLC		
2. The mailing address of	the limited liability	company is:	·			
c/o Resortquest International,	Inc., 8955 Highway 98 V	V, Suite 203, D	estin, FL 32550			
Dear-hay 20, 2002			T 02000024200			
December 20, 2002 L02000034320						
3. Date of filing/registrati	on in Florida		4. Document n	umber		
5. The name of the register Florida Department of S		gistered offic	e address as show	n on the records of the		
	CT	Corporation Sy	stem			
		Name				
	1200 S	outh Pine Islan	d Road	A ST		
		Address				
	Pla	ntation, FL 33	324	基		
	City, State and Zip					
6. The name and address of	of the new registered	agent and/or	office:	PILED PH 2: 35 2006 FEB 10 PH 2: 35 OFFICIAL AHASSEE, FLORIDA		
	Corpora	tion Service Co	ompany	10RIN		
Name						
1201 Hays Street						
	Florida street addre	ess (P.O. Boz	NOT acceptable	;)		
	Tallahassee	FL	32301			
	City,	, State and Zi	ip			
If the limited liability come confirmed that after the chand the business office of liability company, it is her of the members of the limit or the operating agreemen (Signature of a member or authority)	tange or changes are the registered agent the registered agent that the confirmed that the compart of the limited liabil	made, the Fl will be ident he change(s) ny or as other ity company	orida street addre ical. Or, in the ca	ss of the registered office		
Maureen Cullen, Authorized P	erson					
(Printed or typed name of signee)			_			
I hereby accept the appoing comply with the provision and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered s of all statutes relati l accept the obligation his document is being that the limited liabi	agent and a ive to the pro ons of my pos g filed to mei lity company	gree to act in this per and complete sition as registere rely reflect a chan v has been notified	capacity. I further agree to performance of my duties, d agent as provided for in uge in the registered office I in writing of this change.		
(Cignature of Bostins 1 A	- augus					
(Signature of Registered Agent) S	lylvia Quep ye t, Asst. Vic	e President				

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