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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: MYAKKA ESTATES L.L.C. (Name of corporation)	and a supplementary
DOCUMENT NUMBER: 4030000 1255	<del></del>
The enclosed Statement of Change of Registered Office/Agent and fee are submitted	for filing.
Please return all correspondence concerning this matter to the following:	
K STEVEN ROBERTS (Name of person)	
_*	
MYAKKA ESTATES, LLC(Name of firm/company)	量工
6919 SPINNAKER BLVD.	SSEE TO
(Address)  ENGLEWOOD FL 34224	SSEE, FLORING
(City/state and zip code)	075
For further information concerning this matter, please call:	
(Name of person) at (214) 165 5540 (Area code & daytime telephone num	per)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 3, 2003

K STEVEN ROBERTS MYAKKA ESTATES, L.L.C. 6919 SPINNAKER BLVD. ENGLEWOOD, FL 34224

SUBJECT: MYAKKA ESTATES, L.L.C.

Ref. Number: L03000001255



We have received your document for MYAKKA ESTATES, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Letter Number: 203A00064990

Joey Bryan Document Specialist

Division of Corporations - P.O.  $BO\overline{X}$  6327 - Tallahassee, Florida 32314

## 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: MYAKKA ESTATES, L.L.C.
2. The mailing address of the limited liability company is: 6919 SPINNAKER BLVO.
ENGLEWOOD FL 34224
1/10/03
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
MARY A TUPSIC - 12 %
MARK A. ZUPSIC  Name  6919 SPINITURER BLVO.  Address  ENGLEWOOD FL 34224  City, State and Zip  6. The name and address of the new registered agent and/or office:
Address School Co. Telephone C
City, State and Zip
6. The name and address of the new registered agent and/or office:
DARRYC A NEWELL
Name 3579 SOUTH ACCESS ROAD, SUITE L
Florida street address (P.O. Box NOT acceptable)
Profida street address (1.0. box 1401 acceptable)
ENGLEWOOD FL 34224
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)
i i i i i i i i i i i i i i i i i i i
THOMAS C. HEISE
(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)
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