## \_0300000 1511

(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:	

Office Use Only



400137603494

11/10/08--01023--002 \*\*25.00

OB NOV 10 PH 2: 53

J. BRYAN
MOV 1.9, 2008
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Raintree Properties, LL (Name	C e of Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concernin	g this matter to the following:	
G. Alan Howard		
(Name of Person)		08 HOV 10 PM 2: 53
Milam Howard Nicandri Dees & Gillam, P.A.	· <u>······</u>	_
(Firm/Company)		0 P
14 East Bay Street		H 2: 5
(Address)		ယ်
Jacksonville, FL 32202		
(City/State and Zip Code)		
For further information concerning this ma	tter, please call:	
G. Alan Howard	at (904) _357-3660	
(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 follow	ing amount:	
	☐ \$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.

1. Name of the limited liability company: Raintree Pr	operties, LLC
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	y: 5921 Richard Street  Jacksonville, FL 32216
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Same
January 14, 2003 3. Date of filing/registration in Florida	L03000001511  4. Document number  the records of the Florida Dept. of State:
<ul><li>5. (a) Registered Agent and Registered Office shown on</li></ul>	the records of the Florida Dept. of State:
Registered Agent:	Glazier & Glazier, P.A.
Registered Office Address:	8825 Perimeter Park Blvd., Suite 504  Jacksonville, FL 32216
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	W Registered Office address:  Milam Howard Nicandri Dees & Gillam, P.A.
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	14 East Bay Street  Jacksonville ,FL 32202
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company.  Michael Roethala (Signature of a member or authorized representative of a member)	et address of the registered office and the business
Managing Member (Printed or typed name of signee)	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutions of my position am joiniliar 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 oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.
(Signature of Registered Agent)	

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