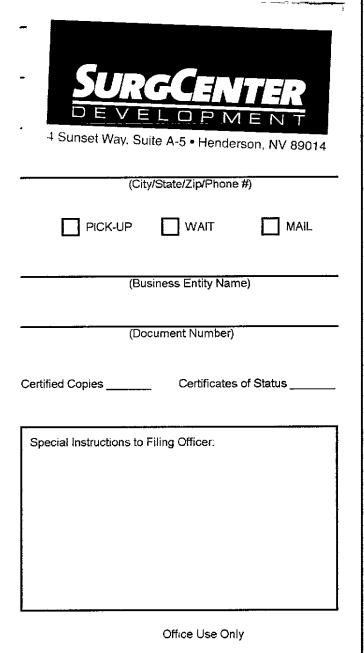
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PAD9 DEB-21-05

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 lim	ited liability compa	ny is: Lake M	ary ASC Realty, L	LC .
2. The mailing address	of the limited liabil	lity company is	460 St. Charles	Court
Lake Mary,FL 32746				
1-30-03			L03000003733	
3. Date of filing/registration in Florida		_	4. Document number	
5. The name of the regis Florida Department of		n System	e address as shown	on the records of the
	1200 S. Pine I	Name sland Road		
	Plantation, FL			-
	.	City, State and	Zip	\$ G
6. The name and addres	s of the new registe	red agent and/or	office:	FIG. 1
	Deb Ulmer			2
	Name 460 St. Charles Court			SSEE
	Florida street ac	ddress (P.O. Bo	NOT acceptable)	المجارية المجارية
	Lake Mary	_{FL} 327	46	SEL W
	C	City, State and Z	ip	7,7
If the limited liability co confirmed that after the and the business office liability company, it is hithe members of the limit the operating agreement (Signature of a member or auth	change or changes of the registered age nereby confirmed the ted liability compart of the limited liabi	are made, the Flent will be ident at the change(s) by or as otherwish lity company.	orida etreet address	Florida, it is hereby of the registered office of a Florida limited d by an affirmative vote of ticles of organization or
Deb Ulmer				
(Printed or typed name of signe	ee)		_	
I hereby accept the app comply with the provision and I am familiar with a Chapter 608, F.S. Or, is address, I hereby confir (Signature of Registered Agent	umy	red agent and a clative to the pro cations of my po eing filed to me ability company	gree to act in this ca per and complete p sition as registered rely reflect a chang has been notified i	spacity. I further agree to erformance of my duties, agent as provided for in e in the registered office n writing of this change.

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

FILING FEE: \$25.00

INHS18(10/99)