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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.

agent, or both, in the Sta		- Charles of the Charles		gree or registered
1. The name of the limit	ed liability compa	any is: Positano Holdir	igs, LLC	-
		ility company is : 405 G		asota, FL 34242
February 20, 2003		L03	000006331	
3. Date of filing/registra	tion in Florida	4. Do	cument number	
5. The name of the regist Florida Department of	State:	e registered office address Intosh c/o Piper Rudnic		ecords of the
		Name nedy Boulevard, Suite		= ▼
	Tampa, FL 3	Address		-
6. The name and address	of the new registe			
	Bruce P. Cha	pnick, Esq./Icard, Merri	II, et al.	<u> </u>
	2033 Main Str	reet, Suite 600		O3 DEC
	Florida street a	ddress (P.O. Box NOT a	cceptable)	80 - 33
	Sarasota,	FL 34237		N ∷
	(City, State and Zip		
confirmed that after the cand the business office o liability company, it is he	change or changes f the registered agereby confirmed the diability compa of the limited liab	<u> </u>	eet address of the re in the case of a Flore re authorized by an	egistered office rida limited
Wallace R. Devlin				
(Printed or typed name of signee	•			·-
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address. I hereby confirm	nintment as registe ns of all statules r ad accept the obli- this document is l a that the limited h	ered agent and agree to a elative to the proper and gations of my position as being filed to merely refle iability company has bee	ct in this capacity. complete performa registered agent as ct a change in the r n notflied in writing	I further agree to nce of my duties, provided for in egistered office

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

INHS18(10/99)

FILING FEE: \$25.00