

ħ	(Req	uestor's	Name)			
(	(Add	ress)				
	(Add	lress)				
	(City	/State/Z	ip/Phone	e #)		
PICK-L	JP	□ v	/AIT	ļ	N	1AIL
	(Bus	iness E	ntity Nar	ne)		
	(Doc	ument l	Number)			
Certified Copies	<u>-</u>	Се	rtificates	of St	atus _	
Special Instruction	ns to F	iling Off	icer:	· · · ·		

Office Use Only

G. MCLEOD

APR 21 2011

**EXAMINER** 



600201613646

04/20/11--01033--016 \*\*55.00

TI APR 20 AM II: 14
SECRETARY OF STATE
ALL A HASSEF FLORIDA

## **COVER LETTER**

TO:	Registration Section Division of Corporations	<del>'g</del>					
SUBJ	SUBJECT: Oaks D102, LLC  Name of Limited Liability Company						
	rune or i	Similed Blastiky Company					
Dear S	Sir or Madam:						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please	e return all correspondence concerning	this matter to the following:					
	Sandra J. Mathis						
	Name of Person						
	Dhilling Davidsones & Compare	<i>\( \)</i>					
	Phillips Development Corpora Firm/Company	tion					
		•					
	6106 MacArthur Blvd.						
	Address						
	Dellarada MD 00040						
	Bethesda, MD 20816 City/State and Zip Code						
City/State and Zip Code							
smathis@phillipsfinancial.com  E-mail address: (to be used for future annual report notification)							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
	Sandra J. Mathis	_ at (301)320-0489					
	Name of Person	Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS:	MAILING ADDRESS:					
	Registration Section	Registration Section					
	Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327					
	2661 Executive Center Circle	Tallahassee, Florida 32314					
	Tallahassee, Florida 32301						
Enclosed is a check for the following amount:							
	\$25 Filing Fee	\$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.

Name of the limited liability company:	Oaks D102, LLC						
2. (a) Principal office address of limited liability company	y: 123 Lake Winnemissett Dr.						
(Note: MUST BE STREET ADDRESS)	DeLand, FL 32724						
(b) Mailing address of limited liability company:	6106 MacArthur Blvd.						
(Note: MAY BE POST OFFICE BOX)	Bethesda, MD 20816						
April 22, 2003	L03000014402						
3. Date of filing/registration in Florida	4. Document number						
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:						
Registered Agent:	CT Corporation						
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324						
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	W Registered Office address: CF STA						
(MUST BE FLORIDA STREET ADDRESS)	DeLand, FL ,FL32724						
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							
Leland H. Phillips, Manager Printed or typed name of signee	_						
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.						

ن جرما عراق