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EXAMINER



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TO JAN 20 MM 1:42
SECRETARY OF STATE
ALLAHASSEE, FLORID.



COVER LETTER

TO: Registration Section Division of Corporations		
	s of Gainesville, LLC	
Name of Limi	ted Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this	matter to the following:	
Jeanie Curl		
Name of Person		
Bosshardt Realty Services, LLC		
Firm/Company		
5522 NW 43rd Street		
Address		
Gainesville, Fl. 32653 City/State and Zip Code		
Chyrstate and Zip Code		
E-mail address: (to be used for future annual report notification)	ation)	
For further information concerning this matter, p	lease call:	
John Thomas at a	(352) 538-4453	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327	
Tallahassee, Florida 32301	Tallahassee, Florida 32314	
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.

1. Name of the limited liability company:	OutParcels of Gainesville, LLC
2. (a) Principal office address of limited liability comp	eany: 4041-B NW 37th Place
(Note: MUST BE STREET ADDRESS)	Gainesville, Fl. 32606
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	5051 SW 60th Street Road #1901
4/28/2003	Ocala, Fl. 32935
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:	Chamberlain, Steven M. 🔁 🛪
Registered Office Address:	520 SE Fort King Street ♣ ♣ ♠ ♠ ♠ ♠ ♠ ♠ ♠ ♠ ♠ ♠ ♠ ♠ ♠ ♠ ♠ ♠ ♠
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address NEW Registered Agent: Bosshardt Realty Services LLE	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5522 NW 43rd Street Suite A
(MUSI BE FLORIDA STREET ADDRESS)	Gainesville, ,FL32653
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	
John Thomas (As Agent) Printed or typed name of signee	<u> </u>
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.

Signature of Registered Agent

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