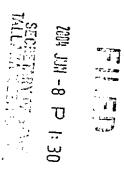
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TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations			
CHID	ECT: Big Sky Management			
SUBJ.	(Name of corporation)			
DOC	JMENT NUMBER: L03000015339			
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for fil	ing.		
Please	return all correspondence concerning this matter to the following:			
	Daniel Donahue			
	(Name of person)	.,	_	
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	Big Sky Management, LLC (Name of firm/company)		=	<u>i</u>
	(Name of Inniveonipally)		-=	COLUMN TO SERVICE STATE OF THE
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_	(Address)	- ;		لاعبيد
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	11.11.1.1.51.0000		30	
	Hallandale, FL 33009			
	(City/state and zip code)			
For fu	ther information concerning this matter, please call:			
Danie	el Donahue at (954) 456-19	973		
	(Name of person) at (954) 456-19 (Area code & dayting)	ne te	lephon	e number)
Enclos	ed is a \$35.00 check made payable to the Department of State.			
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorpoP.O. Box 6327409 E. Gaines StreetTallahassee FI 32314Tallahassee FI 3	ration et	ns	



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 12, 2004

DANIEL DONAHUE BIG SKY MANAGEMENT, LLC 374 ANSIN BLVD. HALLANDALE, FL 33009

SUBJECT: BIG SKY MANAGEMENT, LLC

Ref. Number: L03000015339

We have received your document for BIG SKY MANAGEMENT, LLC and your check(s) totaling \$315.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 004A00033137

Agnes Lunt Document Specialist

Division of Compositions D.O. DOV COOT Mallahaman Elastic 20014

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 limited liability company is: BIQSKYManagement, LLC.
2. The mailing address of the limited liability company is: 374 Ansin Blud.
Hallandale FL 33000
4/8/03 L030000 15339
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Name Name (30)
Address Hallandale FL 33009 City, State and Zip
6. The name and address of the new registered agent and/or office:
Daniel Donahue Name 374 Ansin Blud. Florida street address (P.O. Box NOT acceptable)
Fallandale, FL 33009 8 City, State and Zip
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)
(Printed or typed name of signee)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change. (Signature of Registered Agent)

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

INHS18(10/99)

FILING FEE: \$25.00