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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 state of Ptortaa.		
1. The name of the limited liability co	mpany is: <u>LJB Properties, LL</u>	<u>c</u>
2. The mailing address of the limited	liability company is: P. O. Box 25	35
	Marco Island	FL 34146
May 2, 2003	L030000159	04
3. Date of filing/registration in Florid	a 4. Document num	nber
5. The name of the registered agent an Florida Department of State:	d the registered office address as shown of	on the records of the
Steph	nen V. Robison	
5405	Name Park Central Court	
	Address	
Naple		芦 瘤 冒
	Es, FL 34109 City, State and Zip	SECRETARIAN DET
6. The name and address of the new re	gistered agent and/or office:	7 2
Christ	copher A. Roche, Esquire	™ o m
	Name orth Collier Boulevard	D
		SET TO
Florida str	eet address (P.O. Box NOT acceptable)	3 S
	Naples, FL 34145	
	City, State and Zip	
confirmed that after the change or cha and the business office of the registere liability company, it is hereby confirm the members of the limited liability countries the operating agreement of the limited (Signature of a member or authorized representation of the limited (Printed or typed name of signee)		of the registered office of a Florida limited d by an affirmative vote of ticles of organization or
I hereby accept the appointment as recomply with the provisions of all status and I am familiar with and accept the Chapter 608, F.S. Or, if this document address, I hereby confirm that the lime (Signature of Registered Agent)	egistered agent and agree to act in this ca ties relative to the proper and complete pe obligations of my position as registered of it is being filed to merely reflect a change ited liability company has been notified in	pacity. I further agree to erformance of my duties, igent as provided for in in the registered office writing of this change.

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

INHS18(10/99)