P.01 1-26-04 07:35A AC\$/28/2004 10:32 FAI 305 358 Division of Corp. Page 1 of 1 Public Access System Electronic Filing Cover Sheet Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H040001 3285 3))) Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850) 205-0380 From: : WHITE & CASE Account Name Account Number : 075410002143 (305) 371-2700 Phone Fax Number (305) 358-5744 REGISTERED AGENT CHANGE LOTSAHATCHEE, LLC Certificate of Status 0 Certified Copy 0 01 Page Count Estimated Charge \$35.00 1516028-0600 Public Access dielp Electronic Filing Menu Corporate Elling

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WEITE & CASE LLP

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the lin	nited liability company is:	OTSAHATCHEE, LLC	
		any is : P.O. BOX 2500, PALM BEACH	
FLORIDA 33480			<b></b> ,
May 15, 2003		L03000017498	
3. Date of filing/regist	ration in Florida	4. Document number	-
		ed office address as shown on the records of the	
Florida Department	of State.  CT Corporation Syste	m	
		ame	
	1200 South Pine Islan	dress	
	Plantation, FL 33324		
	City, Sta	te and Zip	
<ol><li>The name and address.</li></ol>	ss of the new registered agen	t and/or office:	
	John Gay	,	
	Nar 22/ Australian Avenud	to Unit 3C	
	Florida street address (F	O. Box NOT acceptable)	
	City, State	2 and Zip	
confirmed that after the and the business office liability company, it is	e change or changes are made of the registered agent will he hereby confirmed that the ch	for the laws of the State of Florida, it is hereby to the Florida street address of the registered office identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote of the wise provided in the articles of organization or pany.	er olvis
(Signature of a member or authorized representative of a member)		<del> </del>	
John Gay		26 5	33 <u>7</u>
(Printed or typed name of signee)			
I hereby accept the ap comply with the provis and I am familiar with Chapter 608, F.S. Or, address, I hereby confi	pointment as registered agen lons of all statutes relative to and accept the obligations of if this document is being file rm that the limited liability c	t and agree to act in this capacity. I further agree to the proper and complete performance of my affices, I my position as registered agent as provided for in i to merely reflect a change in the registered affice company has been notified in writing of this change,	SIVIITABU SIVIE
(Signature of Registered Age		; *	
to Purma to writizented when	rej gr	t .	

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

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