

L03000020166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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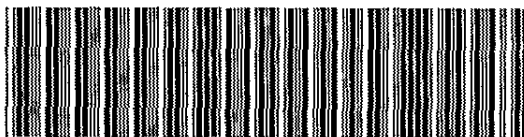
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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*[Signature]*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The EDP 1228 LLC  
(Name of Corporation)

**DOCUMENT NUMBER:** L03000020166

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Edward D. Pascoe  
(Name of Contact Person)

The EDP 1228 LLC  
(Firm/Company)

1871 N.W. North River Drive  
(Address)

Miami Florida 33125  
(City/State and Zip Code)

For further information concerning this matter, please call: at ( ) \_\_\_\_\_

Edward Pascoe 305-326-0060 X102  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address: Street Address:**

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

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

SECRET  
OFFICE OF THE  
CLERK OF THE  
SUPREME COURT  
TALLAHASSEE, FLORIDA

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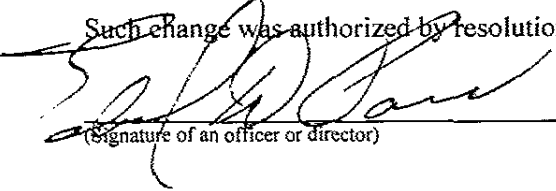
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STATEMENT OF CHANGE OF REGISTERED OFFICE FOR LIMITED LIABILITY  
COMPANY

*This statement of change is submitted for a limited liability company organized under the laws  
of the State of Florida in order to change its registered office in the State of Florida.*

1. The name of the Limited Liability Company: The EDP 1228 LLC
2. The principal office address: 1871 N.W. North River Drive Miami, Fl. 33125  
(previously 253 SW 22 Ave. Miami, Fl 33135)
3. The mailing address (if different): \_\_\_\_\_
4. Date of information: JUNE 30, 2006 Document number: LC3000020166
5. The street address and mailing address of the new registered office:  
1871 N.W. North River Drive, Miami, Florida 33125  
(P.O. Box NOT acceptable)

Such change was authorized by resolution duly adopted by its Managing Member.

  
(Signature of an officer or director)

Edward D. Pascoe Managing Member  
(Printed or typed name and title)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. Box 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)