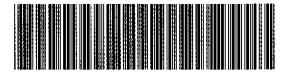
## L03000020347

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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

## **COVER LETTER**

Division of Corporation	ons		
SUBJECT:	Mahi P	roperties, LLC	
	<del>*************************************</del>	d Liability Compan	у
Dear Sir or Madam:			
The enclosed Registered Ager	nt/Registered Office	Change and fee(s) a	are submitted for filing.
Please return all corresponden	ce concerning this n	natter to the followi	ng:
	n Williams		
Name of I	'erson		
Greg A. Be	tterton, PA	·	
735 E Venice Av			
Addres	<b>;</b>		
Venice, F City/State and	L 34285 Zip Code	<del>- 9 - 11 - 11 - 11 - 11 - 11 - 11 - 11 </del>	
marylynn@be E-mail address: (to be used for fu	tertonlaw.com	on)	
For further information conce	rning this matter, ple	ease call:	
Mary Lynn Willia	ims at (_	941)	488-4422
Name of Person		Area Code & D	Daytime Telephone Number
STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, Florida 323	s Circle	MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, Flo	ction porations
Enclosed is a check for the following amount:			
\$25 Filing Fee		\$55 Filing Fee	e & Certified Copy

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 Pioriaa.		
Name of the limited liability company:	Mahi Properties, LLC	
2. (a) Principal office address of limited liability compan		
(Note: MUST BE STREET ADDRESS)	101 Pond Cypress Road S S F Venice, FL 34292 F S D	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)	101 Pond Cypress Road Venice, FL 34292	
6/5/2006	L03000020347	
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:	Greg A, Betterton	
Registered Office Address:	981 Ridgewood Avenue, Suite 101 Venice, FL 34285	
•	Verlice, FL 34203	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address:  Greg A. Betterton	
NEW Registered Office Address:	735 E Venice Avenue, Suite 200	
(MUST BE FLORIDA STREET ADDRESS)	Venice ,FL34285	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other 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 a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with and accept the obligations of my possible to the prand I am familiar with an accept the obligation of the prand I am familiar with an accept the obligation of the prand I am familiar with an accept the obligation of the prand I am familiar with an accept the obligation of the prand I am familiar with an accept the obligation of the prand I am familiar with an accept the obligation of the prand I am familiar	lorida street address of the registered office tical. Or, in the case of a Florida limited ) was/were authorized by an affirmative vote rwise provided in the articles of organization /.	
Signature of Registered Agent		

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