

TCA DOVELOPMENT GROUP
901 SW MARTIN DOWNS BIUD.
- PALM CITY, FL 34990 -
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08/22/05--01021--016 **25.00



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 limite	d liability company is:	TCA DEVELOPMENT GI	KOUF	, LLC		,
		mpany is: 901 SW MARTII).
SUITE 203 PALM CITY	ر, FL 34990 (گرار	ew Address)				
6/13/2003		L0300002152	—— 8			
3. Date of filing/registrati	on in Florida	4. Document nu	mber			
5. The name of the registe Florida Department of S	red agent and the regist	ered office address as shown	on the	e record	ds of t	he
riorida Department or t	WILLIAM W. MCCC	NWN				
	15499 WHISPERIN	Name	-			
		Address	- *		•	
	WELLINGTON, FL		- 18	ΤAs	0	
	City,	State and Zip	• <u>:</u>	FC	ن ⊒>	capq
6. The name and address of	of the new registered ag	ent and/or office:		AllA	05 AUG 2	3 [
	JEFFREY D. RUBIN	N .		55.	22	
	901 SW MARTIN D	Name OWNS BLVD SUITE 203			PH 2	
	Florida street address	(P.O. Box NOT acceptable)			2:27	<u></u> F
	PALM CITY	FL 34990		Þ		
	City, St	ate and Zip				
confirmed that after the cl	range or changes are mathe registered agent will be confirmed that the diability company or a fithe limited liability confirmed that the limited liability confirmed the limited liability confirmed liability liability confirmed liability liability confirmed liability		of the	e regist Florida	ered o	office ed
JEFFREY D. RUBIN						
(Printed or typed name of signee)			•			
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Optificaddress, Thereby confirm	intment as registered as s of all statutes relative d accept the obligation his document is being f that the limited liability	ent and agree to act in this co to the proper and complete p to finy position as registered iled to merely reflect a chang to company has been notified i	ipacii erfor agent e in tl n wri	ty. I fun mance t as pro he regis ting of	rther of my videa stered this c	agree to duties, for in office hänge.
(Signature of Registered Agent)		 ::				
Divisio	on of Corporations, P.G	O. Box 6327, Tallahassee, Fl	L 32 3	314		

FILING FEE: \$25.00

INHS18(10/99)