L030000 24847

(Requestor's Name)		
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(Document Number)		
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05/17/04--01058--009 **25.00

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WALLIS & WALLIS

PROFESSIONAL ASSOCIATION

Peter E.S. Wallis Joan Martino Wallis 2641 EAST ATLANTIC BLVD.

SUITE 307

POMPANO BEACH, FL 33062

TEL: 954-941-9005 FAX: 954-941-9010

E-MAIL: PETER@WALLISANDWALLIS.NET • JOAN@WALLISANDWALLIS.NET

May 12, 2004

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

Re: Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company.

Document Number: L03000024847

Dear Sir/Madam:

Please be advised that the undersigned represents <u>Living Color Property Development</u>, <u>LLC</u> in the aforementioned matter.

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company, for Living Color Property Development, LLC and a check in the sum of twenty-five dollars (\$25.00) for the required Filing Fee.

Please feel free to contact me if you have any questions or further requirements. Thank you for your time and attention to this matter.

Martino Wallis / 464

Regards.

Joan/Martino Wallis

Wallis & Wallis

Enclosure

04 MAY 17 AM 9: 57

DIVISION OF CORPORATIONS

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 limited liability company is:	Living Color Property Development, LLC
2. The mailing address of the limited liability con	mpany is: 900 E. Atlantic Ave.
Suite 5, Delray Beach, FL 33483	
7/9/03	L03000024847
3. Date of filing/registration in Florida	4. Document number
Florida Department of State:	ered office address as shown on the records of the
	& Wallis, P.A.
	Name ean Blvd Ste 307
	Address
	State and Zip
•	•
6. The name and address of the new registered ag	
Wallis 8	& Wallis, P.A.
2641 E. Atla	lame Intic Blvd, Ste 307
Florida street address	(P.O. Box NOT acceptable)
Pompano Beach	, _{FL} 33062
City, St	ate and Zip
and the business office of the registered agent will liability company, it is hereby confirmed that the office the members of the limited liability company or at the operating agreement of the limited liability company or at the operating agreement of the limited liability company or authorized representative of a member Craig M. Valvo (Printed or typed name of signee) Thereby accept the appointment as registered agent.	ide, the Florida street address of the registered office I be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote of so otherwise provided in the articles of organization or mpany.
comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 608, F.S. Or, if this document is being fix address, I hereby confirm that the limited liability (Signature of Registered Agent)	ent and agree to det in this capacity. I further agree to to the proper and complete performance of my duties, to fmy position as registered agent as provided for in led to merely reflect a change in the registered office company has been notified in writing of this change.

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

INHS18(10/99)

FILING FEE: \$25.00