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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Living Color Property Development, LLC Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Todd Ashford		
Name of Person		
Dana Parham Holdings		
Firm/Company		
6751 N. Federal Highway Suite 101		
Address		
Boca Ratono, Fl. 33487		
City/State and Zip Code		
Todd@dphi1.com E-mail address: (to be used for future annual report notification)		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Todd Ashford at (561) 869-5702		
Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: MAILING ADDRESS:		
Registration Section Registration Section		
Division of Corporations Division of Corporations		
Clifton Building P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32314		
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee & Certified Copy		

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. Name of the limited liability company: Living (Color Property Development, LLC
2. (a) Principal office address of limited liability compan	y: 6751 N. Federal Highway Suite 10
(Note: MUST BE STREET ADDRESS)	Boca Raton, Fl. 33487
(b) Mailing address of limited liability company:	Same as above
(Note: MAY BE POST OFFICE BOX)	
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:	Craig Valvo
Registered Office Address:	900 East Atlantic Ave. #5 Deiray Beach, Fl. 33483
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address: Todd Ashford
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Boca Raton ,FL33487
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 ident liability 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	lorida street address of the registered office ical. Or, in the case of a Florida limited () was/were authorized by an affirmative vote wise provided in the articles of organization.
DANA PARHAM	
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 prought I am familiar with and accept the obligations of my postpaper 608, F.S. Or, if this document is being filed to meaddress, I hereby confirm that the limited liability company	gree to act in this capacity. I further to gree to oper and complete performance of my duties sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent	
Division of Corporations, P.O. Box 63: FILING FEE: \$2	