Division of Corporations **Electronic Filing Cover Sheet**

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ncone@colonialcompany.com

S

LLC REGISTERED AGENT CHANGE PINECREST INVESTORS, LLC

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EXAMINER

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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: Pinecrest Inves	tors, LLC		
2. (a) Principal office address of limited liability compar	ny: 5251 Hampstead High S	treet, Un	it 203
(Note: MUST BE STREET ADDRESS)	Montgomery, Alabama 36116	¥2,03	8
		- F G	훙
(b) Mailing address of limited liability company:	5251 Hampstead High Street, Un	it 203	<u> </u>
(Note: MAY BE POST OFFICE BOX)	Montgomery, Alabama 36116	SSE	•
1100-1001 1001 001 001		<u> </u>	
7/14/2003	L03000025612	<u> </u>	工 (2)
3. Date of filing/registration in Florida	4. Document number	22	
	. a		
5. (a) Registered Agent and Registered Office shown of	a the records of the Plonda Dept	. or State	c :
Registered Agent:	CFRA, LLC		
Registered Office Address:	CORPORATE CENTER THREE		
	4221 W. BOY SCOUT BLVD, 10TH FLOOR TAMPA FL 33607-5736 US		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address:		
NEW Registered Agent:	C T Corporation System		
NEW Registered Office Address:	1200 South Pine Island Road,		
<u>(MUST BE FLORIDA STREET ADDRESS)</u>	plantation	,FL _43 3	70
	•		-
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as other than the operating agreement of the limited liability company.	Florida street address of the regintical. Or, in the case of a Florid's) was/were authorized by an aff	stered of la limite firmative	ffice d e vote
Signature of a member or authorized representative of a member			
Anna C. Lowder, Manager			
Printed or typed name of signee	-		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my package to the colligations of my package to the colligation of the paddress, I hereby confirm that the limited liability compa	agree to act in this capacity. If roper and complete performance exition as registered agent as pr erely reflect a change in the reg ny has been notified in writing o	urther a e of my c covided f istered of this ch	gree to duties, for in office ange.
Mark Williams, AVP C T Corporation Sys	stem .		

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

INTIS18 (05/08)

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