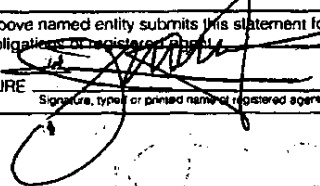
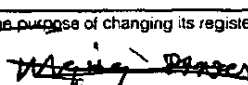
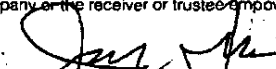


5/4

05-05-2004 90015 014 ****50.00

DOCUMENT # L03000027651				Secretary of State	
1. Entity Name LAND YACHT LLC				05-05-2004 90015 014 ****50.00	
Principal Place of Business 1323 GASPARILLA DRIVE FORT MYERS FL 33901		Mailing Address 1323 GASPARILLA DRIVE FORT MYERS FL 33901		34007316	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		MOORE CR2E083 (11/03)	
City & State		City & State		4. FEI Number 20-0114774	
Zip		Country		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent LUMSDEN, DENNIS J 6719 WINKLER ROAD, #121 FORT MYERS FL 33919				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		SIGNATURE 		DATE 2/28/04	
		FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
MGRM CRONIN, THOMAS R SR. 1910 VIRGINIA AVENUE FORT MYERS FL 33901 ☐ Delete			☐ Change ☐ Addition		
MGRM FINSTROM, JON K 1323 GASPARILLA DRIVE FORT MYERS FL 33901 ☐ Delete			☐ Change ☐ Addition		
MGRM GYARMATHY, GARY S 1920 VIRGINIA AVENUE FORT MYERS FL 33901 ☐ Delete			☐ Change ☐ Addition		
☐ Delete			☐ Change ☐ Addition		
☐ Delete			☐ Change ☐ Addition		
☐ Delete			☐ Change ☐ Addition		
☐ Delete			☐ Change ☐ Addition		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: 			2/28/2004 239-823-4418		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		