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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. The name of the limite	d liability company is:	BOGGY CREEK	LANDING, LL	.c			
2. The mailing address of	Call a limited limbility as		wn Plaza Cot	ırt Su	ite 201	10	
		inpany is:					
WINTER SPRINGS, F	L 32/08		<u> </u>				
07/25/03 LC		L0300	3000027701				
3. Date of filing/registration in Florida 4. Document m							
5. The name of the register Florida Department of	State:		s shown on the	record	is of the	B	
	DEBORAH D. HAG						
	636 N. RIO GRANI	Name DE AVE.					
	ORLANDO, FL 328						
	City,	State and Zip					
6. The name and address	of the new registered ag	gent and/or office:		•			
	GREGORY D. LEE				J	, : H	
	1100 TOWN PLAZ	Name COURT, SUITE 2	010	مرح نسب رئار کار سم جس ت	لببا		
	Florida street address	(P.O. Box NOT acc	eptable)	ÇF.	5		
	WINTER SPRINGS	FL 32708					
	City, S	tate and Zip					
If the limited liability come confirmed that after the cland the business office of liability company, it is her the members of the limite the operating agreement of the limite the operating agreement of support of a member or authority of the limite the operating agreement of the limite the operating agreement of the limite the operating agreement of the limited that the limited that the limited has been supported by the limited that the limited has been supported by the limit	nange or changes are method the registered agent with the confirmed that the diability company or a fithe limited liability confirmed the limited liability confirmed liability liability confirmed liability confirmed liability	ade, the Florida street Il be identical. Or, in change(s) was/were a is otherwise provided ompany.	t address of the	registe	ered off	fice vote of on or	
LARRY W. WILLIAMS,	MANAGER						
(Printed or typed name of signee)							
I hereby accept the appoint the appoint comply with the provision and I am familiar with an Chapter 508 F.S. Of, if the address, I hereby confirm	intment as registered as sof all statutes relative daccept the obligation his document is being that the limited liabilit	tent and agree to act to the proper and co s of my position as re iled to merely reflect y company has been t	in this capacity implete perforn gistered agent a change in the notified in writi	r. I fur nance o as pro e regis ing of i	ther ag of my d vided fo tered o this cha	ree to uties, or in ffice inge.	
(Signature of Registered Agent)	_ 						

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

INHS18(10/99)

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