

L03000032949

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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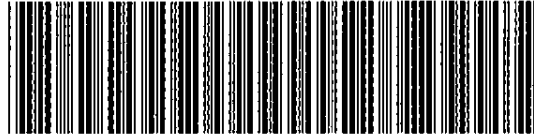
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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T. HAMPTON

APR 16 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Golfstream Turf, LLC
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Alys Nagler Daniels, Esquire
(Contact Person)

Gary, Dytrych & Ryan, P.A.
(Firm/Company)

701 U.S. Highway One, Suite 402
(Address)

North Palm Beach, FL 33408
(City/State and Zip Code)

For further information concerning this matter, please call:

Alys Nagler Daniels at (561) 844-3700
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Law Offices
Gary, Dytrych & Ryan

PROFESSIONAL ASSOCIATION

JOHN W. GARY, III
JAMES H. RYAN
DONALD R. BICKNELL, JR.
LAWRENCE W. SMITH
ALYS NAGLER DANIELS
PETER M. ARMOLD
GREGORY C. PICKEN
ROBERT N. HOGAN, II

RICHARD G. DYTRYCH
1925 - 1996

701 U.S. HIGHWAY ONE, SUITE 402
NORTH PALM BEACH, FLORIDA 33408
TELEPHONE (561)-844-3700
FAX (561)-844-2388

April 14, 2008

VIA FEDERAL EXPRESS

Registration Section
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Golfstream Turf, LLC

Dear Sir/Madam:

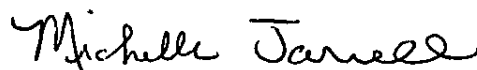
With regard to the above referenced transaction, enclosed please find the following:

1. Statement of Change of Registered Agent and check #52394 payable to Florida Department of State in the amount of \$25.00;
2. Resignation of Manager (John C. Bills) and check #52395 payable to Florida Department of State in the amount of \$25.00; and
3. Resignation of Manager (Wayne H. Babb) and check #52396 payable to Florida Department of State in the amount of \$25.00.

Should you have any questions, please contact our office.

Sincerely,

GARY, DYTRYCH, & RYAN, P.A.



Michelle Jarrell

/mj
Enclosures

**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: Golfstream Turf, LLC
2. The mailing address of the limited liability company is : 20359 SW Warfield Boulevard, Indiantown,
FL 34956

09/02/2003

L03000032949

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

John W. Gary, III / Gary, Dytrych & Ryan, P.A.

Name

701 U.S. Highway One, Suite 402

Address

North Palm Beach, FL 33408

City, State and Zip

6. The name and address of the new registered agent and/or office:

William J. Bosso, Jr.

Name

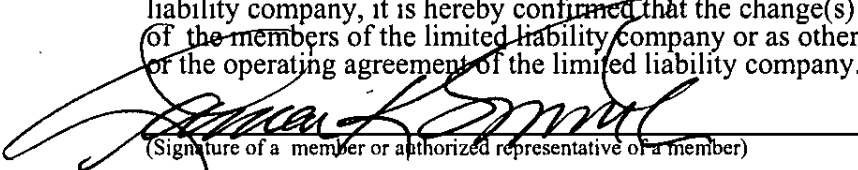
2428 Broadway

Florida street address (P.O. Box NOT acceptable)

Riviera Beach, FL 33404

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


(Signature of a member or authorized representative of a member)

Lamar K. Smith

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


(Signature of Registered Agent)

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

FILING FEE: \$25.00

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SECRETARY OF STATE
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