Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : GOLDBERG BATES, PLLC

Account Number : I20070000134

Phone : (407)893-3776

fex Number : (407)893-3779

REGISTERED AGENT CHANGE

DALTON CLEARWATER, LLC

Certificate of Status Certified Copy 0 Page Count 03 Estimated Charge \$35.00

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COVER CETTER					
TO: Registration Section Division of Corporations					
SUBJECT: Daiton Clearwater, LLC	AT CALIFE COMMON AT CALIFF COMMON AT CAL				
(Name of Linke	d Liability Company)				
Dear Sir or Madam: The enclosed Registered Agent/Registered Office	Change and fro(s) are submitted for filing.				
The site of the same and the same and the same and a same as a same a same a same a same a same a same a s	arrange and reals) are provising to a summer.				
Please roturn all correspondence concerning this m	eatter to the following:				
Jodi Jaiman	7 .5 26				
(Name of Person)	2008 APR -9 SECRETARY FALL AHASS				
	APE APE				
Soone Business Development, Inc.	TA AS				
(Firm/Company)					
	<u> </u>				
3660 Maguire Blvd., Suite 103	FLC 8				
(Address)	AM 8: 28 OF STATE E, FLORIDA				
	□				
Orlando, FL 32803					
(City/State and Zip Cixle)					
For further information concerning this matter, ple	ase call:				
Order Care	ni n				
Machel Farber at (4	407 893-3776				
(Name of Person)	(Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327				
2661 Executive Center Circle	Tallabassee, Florida 32314				
Tallahassee, Florida 32301					
Enclosed is a check for the following amount:					
☑ \$25 Filing Fce	S55 Filing Fee & Certified Copy				

INHS18 (8/05)

04/08/2008 14:00

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GOLDBERG&BATES, PLLC とっているのいののでいた PAGE 03/83

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.4 liability company submits the following states agent, or both, in the State of Florida.	16 or 608.508, Florida Statutes, the nent in order to change its registered	undersigned limite Office or registere	rd 3d
1. The name of the limited liability company i	s: Delton Clearwater, LLC		_•
2. The mailing address of the limited liability	company is : 2875 S. Orange Ave., Suite	e 500	 ·
Orlando, FL 32806			_,
4/8/08	L03000034249		_
3. Date of filing/registration in Florida	4. Document number		
5. The name of the registered agent and the reg Florida Department of State:	gistered office address as shown on the	records of the	
Corporate Creation	ons Network, Inc.		
	Name	•	
11380 Prosperity F		7s 2	
	Address	2008 APR SECRETA	
Palm Beach Garder			7
Cir	y, State and Zip	PR -9 ETAR HASS	1202
6. The name and address of the new registered	agent and/or office:	<u>m</u> <u></u>	FF
Bates Mokwa, PLL	<u>.c</u>		5
CROOLS	Neme	(2) & &	g
3860 Maguire Blvd.,		28	
Florida street addre	ess (P.O. Box NOT acceptable)	> &	
Orlando	FL 32803		
City,	State and Zip		
If the limited liability company is not organize confirmed that after the change or changes are and the business office of the registered agent liability company, it is hereby confirmed that the members of the limited liability company are the operating agreement of the limited liability. Signature of a member of authorized representative of a near	made, the Florida street address of the will be identical. Or, in the case of a F he change(s) was/were authorized by a sy or as otherwise provided in the articity company.	registered office lorida limited o affirmative vote	
Jodi Jaiman (Printed or typed name of signee)			
I hereby accept the appointment as registered comply with the provisions of all statutes relationed I am familiar with and accept the obligation chapter thes. F. D. Or, if this document is being address. I hereby conform that the limited light	agent and agree to act in this capacity we to the proper and complete performing of my position as registered agent a filed to merely reflect a change in the lity company has been positived in writh	I further agree to ance of my duties, is provided for in registered office	>

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

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(Signature of Registered Agent)