

L030000.36398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

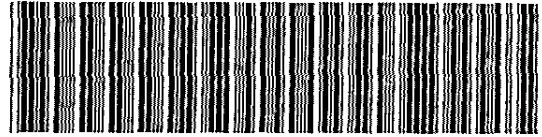
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

wrong form

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: D+B LLC
(Name of corporation)

DOCUMENT NUMBER: L03000036398

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brenda W. Harris
(Name of contact person)

D+B LLC
(Firm/Company)

184 Eglin Pkwy NE, Suite 9
(Address)

Fort Walton Beach, Florida 32548
(City/state and zip code)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Brenda W. Harris at (850) 863-1995
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 6, 2004

BRENDA W. HARRIS
D & B LLC
184 EGLIN PARKWAY, NE, STE 9
FORT WALTON BEACH, FL 32548

SUBJECT: D & B LLC
Ref. Number: L03000036398

We have received your document for D & B LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have completed the wrong form. You must complete a form for a limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 704A00058024

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: D+B LLC
2. The mailing address of the limited liability company is: 184 Eglin Pkwy NE, Suite 9, Fort Walton Beach, Florida 32548
3. Date of filing/registration in Florida: 9-24-03
4. Document number: LO3000036398

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

Brenda W. Harris
Name
2 David Street, Suite E
Address
Fort Walton Beach, FL 32547
City, State and Zip

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

184 Eglin Pkwy NE, Suite 9
Name
Florida street address (P.O. Box NOT acceptable)
Fort Walton FL 32548
City, State and Zip

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TALLAHASSEE, FLORIDA

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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.

Brenda W. Harris
(Signature of a member or authorized representative of a member)

Brenda W. Harris
(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.

Brenda W. Harris
(Signature of Registered Agent)

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