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SECRETARY OF STATE
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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Barrington Estates, LL (Name of		lity Company)		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered	Office Change	e and fee(s) are subm	nitted for filing	•
Please return all correspondence concerning	ng this matter to	the following:		•
Krystal Watson (Name of Person)		_		
Barrington Estates, LLC (Firm/Company)		<u> </u>		
10250 Normandy Blvd., Ste 702				
(Address)			2001 SEP -6 SECRETARY ALLAHASSEE	
Jacksonville, FL 32221			EP -	
(City/State and Zip Code)			787 787 9	D=00=0
For further information concerning this ma	atter, please cal	l: .	OF STATE EF. FLORIDA	
Krystal Watson	at (904_	_) 483-3399		
(Name of Person)	<u> </u>	(Area Code & Dayt	ime Telephone	Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, Florida 3231		
Enclosed is a check for the follow	ing amount:			
✓ \$25 Filing Fee	□ \$:	\$55 Filing Fee & Certified Copy		

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: Barrington Estates, LLC 2. The mailing address of the limited liability company is: 10250 Normandy Blvd., Ste 702 Jacksonville, FL 32221 L03000041015 10/17/2003 Document number Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Ronald W. Fussell Name 8323 Ramona Blvd. Address Jacksonville, FL 32221 City, State and Zip 6. The name and address of the new registered agent and/or office: Ronald W. Fussell Name 10250 Normandy Blvd., Ste 702 Florida street address (P.O. Box NOT acceptable) Jacksonville 32221 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 of the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) Ronald W. Fussell (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.

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

FILING FEE: \$25.00

(Signature of Registered Agent)