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2004 CF CORPORATION



Our File Number: 26410.09000 Writer's Direct Dial Number: 772-223-2220 Writer's E-Mail Address: stessem @gunster.com

February 17, 2004

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

Re: ERC, LLC

Dear Sir:

Enclosed please find for filing the original Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company, together with our check in the amount of \$25.00 to cover your filing fees.

If you need anything else, please let me know.

Sincerely,

Sharon A. Tessem Paralegal

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 lim	nited liability company is: _	ERC, LLC	
		pany is : c/o Carey E. Grah	am,
	l, Ft. Lauderdale, FL 333		
January 27, 2003		1 040000	07253
3. Date of filing/registration in Florida		4. Document numb	ber
5. The name of the regin Florida Department	of State: Paul K. Hines	red office address as shown or	
	777 S. Flagler Drive	Name	O. 18
	West Palm Beach, F	ddress L 33401 late and Zip	THE FILE OF SEE, FLORIDA
6. The name and addre	ss of the new registered age	nt and/or office:	TON A CO
	Carey E. Graham		S. C. C. S.
	1236 Cordova Road	nme	ORION S
	Florida street address (P.O. Box NOT acceptable)	y 0,
	Ft. Lauderdale	FI 33316	
	City, Sta	te and Zip	
confirmed that after the and the business office liability company, it is the members of the lim the operating agreements:	change or changes are made	der the laws of the State of Flore, the Florida street address of be identical. Or, in the case of the hange(s) was/were authorized otherwise provided in the artispany.	f the registered office
B. Rex Stephens, Pr	res. Woodland Resources	s, Inc.	
(Printed or typed name of sign	•		7.6 .1
I hereby accept the ap- comply with the provisi and I am familiar with Chapter 608, F.S. Or, address, I hereby court	pointment as registered age ions of all statules relative t and accept the obligations of if this document is being fill rm that the limited liability	nt and agree to act in this cap o the proper and complete per of my position as registered as ed to merely reflect a change i company has been notified in	acity. I further agree to formance of my duties, gent as provided for in the registered office writing of this change.
(Signature of Rogistered Agen		_	-

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

INHS18(10/99)

FILING FEE: \$25.00