L04000007853

3A+N WOLL ILC (Requestor's Name)
4708 Haden River Rd
(Address)
(Address)
30405040 FL 34040 (City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Carrier Charlet, Carrier,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office I lee Only



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10/19/05--01034--007 **05.00

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: 34th Way LLC					
2. The mailing address of the limited liability company is: 4708 Hidden River Road .					
Sarasota, Florida 34240					
January 22, 2004			T 0.4000007	953	
3. Date of filing/registration in Florida L04000007 4. Document m					
J. David VI IIIII J. Tegiorium	011 111 1 1011 011		. Doddinin ii	***************************************	
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:					
	Sandra L.			_	
	220 05	Name	•		
	338 Shore	Drive Addre		-	
	Sarasota,		34222		
		City, State a	ınd Zip		
6. The name and address of the new registered agent and/or office:					
	D D E1	_		7-0 D	
	B.D.Fraley			- 50u	
	4708 Hidde	Name en River	Road	37	
•	Florida street	address (P.O.	Box NOT acceptable)	9	
	Sarasota	FL	34240		
		City, State an	d Zip	05 OCT 19 MIO: 55	
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)					
Robert M. Leutho (Printed or typed name of signee) I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm (Signature of Registered Agent)		tered agent an relative to the igations of my being filed to liability comp	ad agree to act in this of proper and complete position as registered merely reflect a changany has been notified	capacity. I further agree to performance of my duties, agent as provided for in ge in the registered office in writing of this change.	

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

INHS18(10/99)

FILING FEE: \$25.00