-W4000011547

(Requestor's Name)
4309 Poldo Oaks Ct.
(Address)
SUHE 5 (Address)
Jacksonviller FL 3000
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1/21 HA Ch
104-11547
Office Use Only



500057581855

07/21/05--01017--002 **25.00

M. HODGES

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 liability company submits the following statement in order to change its registered office or regagent, or both, in the State of Florida.	limited istered
1. The name of the limited liability company is: Montecito Investment Company, LLC	
2. The mailing address of the limited liability company is : 7785 Baymeadows Way, Suite 200) <u>, </u>
Jacksonville, Florida 32256	
02/12/04 L04000011547	
3. Date of filing/registration in Florida 4. Document number	
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Douglas R. Maxwell	
Name 4309 Pablo Oaks Court, Suite Five	
Address Jacksonville, FL 32224 City, State and Zip	
6. The name and address of the new registered agent and/or office:	· =
6. The name and address of the new registered agent and/or office: Douglas R. Maxwell	
	 ,
10739 Deerwood Park Blvd., Suite 200A	1
Florida street address (P.O. Box NOT acceptable)	
Jacksonville _{FL} 32256	•••
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 offi 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 the members of the limited liability company or as otherwise provided in the articles of organization the operating agreement of the limited liability company.	ote of
(Signature of a member or authorized representative of a member)	
Douglas R. Maxwell, VP and Assistant Secretary (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree comply with the provisions of all statutes relative to the proper and complete performance of my at and I am familiar with and accept the obligations of my position as registered agent as provided for Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered of address, I hereby confirm that the limited liability company has been notified in writing of this chair (Signature) of Registered Agent)	ree to ities, r in fice rge.
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	

FILING FEE: \$25.00