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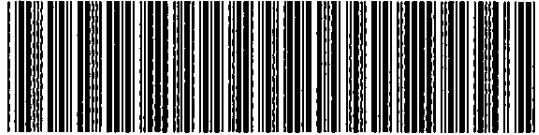
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. HAMPTON

NOV 21 2008

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CARRABELLE MANAGEMENT LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shelley Clifford, Paralegal  
(Name of Person)

Bryan Cave LLP  
(Firm/Company)

161 N. Clark Street, Suite 4300  
(Address)

Chicago, IL 60601  
(City/State and Zip Code)

For further information concerning this matter, please call:

Shelley Clifford at ( 312 ) 602-5061  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



Shelley L. Clifford  
Paralegal  
Direct: (312) 602-5061  
Fax: (312) 698-7461  
shelley.clifford@bryancave.com

November 13, 2008

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Change of Agent Multiple Entities

Dear Sir/Madam:

Enclosed are Statements of Change of Registered Agent for the following companies:

1. Dream Harbors Aquaplex LLC
2. Dream Harbors LLC
3. Dream Harbors Maximo LLC
4. MMV Management LLC
5. PCMC Management LLC
6. Port Canaveral Marine Center LLC
7. The Carrabelle Boat Club LLC
8. AV I Management LLC
9. Carrabelle Management LLC
10. DH Marina Management LLC
11. DHTT Consulting LLC
12. Cocoa Village Marina LLC

Also enclosed is a check in the amount of \$300.00 in payment of the required filing fee of \$25.00 per company. As confirmation of receipt of these statements, I have included an acknowledge copy of each statement and ask that you date stamp

**Bryan Cave LLP**  
161 North Clark Street  
Suite 4300  
Chicago, IL 60601-3315  
Tel (312) 602-5000  
Fax (312) 602-5050  
[www.bryancave.com](http://www.bryancave.com)

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A GOVERNMENT RELATIONS AND  
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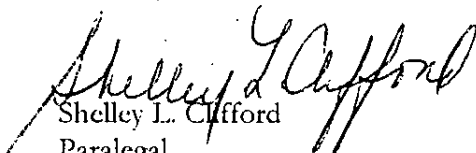
Registration Section  
November 13, 2008  
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Bryan Cave LLP

received each statement and return the stamped copy to me. For use in returning the stamped copies, I have included a prepaid self-addressed stamped envelope.

If you have any questions, please call me.

Sincerely,

  
Shelley L. Clifford  
Paralegal

slc

**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. Name of the limited liability company: Carrabelle Management LLC

2. (a) Principal office address of limited liability company: \_\_\_\_\_  
(Note: **MUST BE STREET ADDRESS**) 909 10th Street South, Suite 105  
Naples, FL 34102

(b) Mailing address of limited liability company: \_\_\_\_\_  
(Note: **MAY BE POST OFFICE BOX**) same as above

February 27, 2004 L04000015771

3. Date of filing/registration in Florida 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: John C. Swanson

Registered Office Address: 909 10th Street South  
Suite 105  
Naples, FL 34102

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent: Walter A. Margerison

**NEW** Registered Office Address: 909 10th Street South  
(**MUST BE FLORIDA STREET ADDRESS**) Suite 105  
Naples, FL 34102

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.

John J. Goebel  
(Signature of a member or authorized representative of a member)

John J. Goebel, member  
(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.*

Walter A. Margerison  
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00

RECEIVED  
2004 A 11 24 5  
TALLAHASSEE, FLORIDA  
STATE OF FLORIDA