## L04000019875

| (Requestor's Name)                                   |                |           |  |  |
|--|----------------|-----------|--|--|
| (Ad  | dress)         |           |  |  |
| (Ad  | dress)         |           |  |  |
| (City/State/Zip/Phone #)                             |                |           |  |  |
| PICK-UP  | WAIT .         | MAIL      |  |  |
| (Business Entity Name)  LO4-19875  (Document Number) |                |           |  |  |
| Certified Copies                                     | _ Certificates | of Status |  |  |
| Special Instructions to Filing Officer:              |                |           |  |  |
|  |                |           |  |  |
|  |                |           |  |  |
|  |                |           |  |  |
|  |                | _         |  |  |

Office Use Only



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O7 MAR 15 PH12: 47 Secredary of State

## **COVER LETTER**

| TO: Registration Section Division of Corporations               |  |  |  |  |  |
|---|--|--|--|--|--|
| SUBJECT: DAIRY INN, LLC, a Florida limited liability company    |  |  |  |  |  |
|   | (Name of Limited Liability Company)                    |  |  |  |  |
| Dear Sir or Madam:  |  |  |  |  |  |
| The enclosed Registered Agent/Registe                           | red Office Change and fee(s) are submitted for filing. |  |  |  |  |
| Please return all correspondence concer                         | rning this matter to the following:                    |  |  |  |  |
| James N. Powell (Name of Person)                                |  |  |  |  |  |
| Powell, Carney, Gross,  |  |  |  |  |  |
| (Firm/Company)  |  |  |  |  |  |
| Bank of America Tower, One Progress Plaza, Suite 1210 (Address) |  |  |  |  |  |
| St. Petersbu  | rg El 33701  |  |  |  |  |
| (City/State at  |  |  |  |  |  |
| For further information concerning this                         | matter, please call:                                   |  |  |  |  |
| James N. Powell   | at ( 727 ) 898-9011                                    |  |  |  |  |
| (Name of Person)  | (Area Code & Daytime Telephone Number)                 |  |  |  |  |
| STREET ADDRESS:   | MAILING ADDRESS:                                       |  |  |  |  |
| Registration Section  | Registration Section                                   |  |  |  |  |
| Division of Corporations Clifton Building                       | Division of Corporations P.O. Box 6327                 |  |  |  |  |
| 2661 Executive Center Circle                                    | Tallahassee, Florida 32314                             |  |  |  |  |
| Tallahassee, Florida 32301                                      |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
| Enclosed is a check in the following an                         | nount:   |  |  |  |  |
| □ \$25 Filing Fee   | □ \$55 Filing Fee & Certified Copy                     |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |

INHS18 (8/05)

## • 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  | e of the limited liability company is: DAILY INN, L                            | <u>LC, a Florida limited liabili</u> | ity com    | <u>pany</u> |     |
|--|--|--------------------------------------|------------|-------------|-----|
| 2. The mail  | ing address of the limited liability company is:                               | 1201 Dr. Martin Luther               | King [     | r. Stre     | eet |
| North, St. P   | Petersburg, Florida 33701  | •                                    |            |             |     |
| 03/15/2004   |  |                                      |            |             |     |
| 3. Date of filing/registration in Florida 4. Document number                 |  |                                      |            |             |     |
|  | e of the registered agent and the registered office ac<br>department of State: | ddress as shown on the rec           | ords of    | the         |     |
|  | Brian J. Hummer  |                                      |            |             |     |
|  | Name   |                                      | ·          |             |     |
|  | 1201 Dr. Martin Luther King Jr.  | . Street North                       | Ts.        | 0           |     |
|  | Address  |                                      | FC         | 7 MAR       |     |
|  | St. Petersburg, FL 33  | 701                                  | E E        | R           | П   |
|  | City, State and Zip  | )                                    | SSE<br>VEX | 5           |     |
| 6. The name and address of the new registered agent and/or registered office |  |                                      | PH         | ED          |     |
|  | DAVID KORNBLUTE  | H                                    | F2 ST      | PM 12: 47   |     |
|  | Name   |                                      | 81         | 5           |     |
|  | 1201 Dr. Martin Luther King Jr.  | . Street North                       | <b>,</b>   |             |     |
|  | Address  |                                      |            |             |     |
|  | St. Petersburg, FL 33  | 701                                  |            |             |     |
| •  | 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 or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of member)

BRIAN J. HUMMER

(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 an 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.

Signature of Registered Agent)