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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Island House (Name of Limit	led Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted	for filing.
Please return all correspondence concerning this	matter to the following:	
Chad A Kelly (Name of Person)		
Island House Title, L	LC_	ZOOG OCT SECRET
3885 20th Street, Su	te 20 2	55A 72
Vero Beach Rt 329 (City/State and Zip Code)	<u>l60</u>	AMII: 19 Y OF STATE SEE, FLORIDA
For further information concerning this matter, p	lease call:	
Chad A. Kolly at (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 an	mount:	
\$25 Filing Fee	\$55 Filing Fee & Certified	l Сору

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.

agent, or both, in the state of 1 tortal.	4 ()	- ,	_
1. The name of the limited liability company is:	nd House T	itle, LL	<u></u> .
2. The mailing address of the limited liability company is:	PO BOX 13	<u>28 </u>	
Vero Beach, R 32961			
· ·	104000	1021506	9
3. Date of filing/registration in Florida	4. Document number)	
5. The name of the registered agent and the registered office Florida Department of State:	address as shown on	the records of the	2
Name 1974 14th. A Address Vero Beach, A City, State and Z	32960	2006 OCT 16 SECRETAL TALLAHAS	
6. The name and address of the new registered agent and/or Chal A Ke II 3885 20th Name Florida street address (P.O. Box	office: Suite 202	2006 OCT 12 AM 11: 19 SECRETARY OF STATE TALLAHASSEE.FLORIDA	D
Vero Beach, FL 3 City, State and Zip	<u>2960</u>		
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)	orida street address of cal. Or, in the case of was/were authorized b wise provided in the a	the registered off a Florida limited by an affirmative	vote
Chal A. 1414 (Printed or typed name of signge)			
I hereby accept the appointment as registered agent and agent comply with the provisions of all statutes relative to the province and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	ree to act in this capa per and complete perf ition as registered age ely reflect a change in has been notified in w	city. I further ag ormance of my di ent as provided the registered of riting of this cha	ree to uties, or in ffice inge.
(Signature of Registered Agent)			

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