## 104000025624

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
6/1 PIA Change
L04-25621
[ UT 2742]

Office Use Only



700037364887

MJH

06/01/04--01052--005 \*\*25.00

04 JUV-1 [H 2: 2]

## SMITH SAUER & DEMARIA

Via Regular Mail

May 27, 2004

ATTORNEYS AT LAW

G. Thomas Smith

Board Certified

Real Estate Attorney

Secretary of State Corporate Records Division Department of State P. O. Box 6327 Tallahassee, FL 32314

RE:

Document Number L04000025621

Perdido Isle Development, L.L.C.

Dear Sir or Madam:

Enclosed please find the original and a copy of the Statement of Change of Registered Office or Registered Agent or Both for Corporations, together with a check in the amount of \$25.00. Please date-stamp the copy as evidence of filing and return it to my attention.

Should you have any questions or need additional information, please do not hesitate to call. Thank you for your usual courtesy.

Sincerely,

ackie S. Abshire

JSA:

**Enclosures** 

c: Perdido Isle Development, L.L.C.

## 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 limite	d liability company is:	Perdido	Isle Development, L.L	C.			
2. The mailing address of the limited liability company is : 4458 Ocean View							
Destin, Florida 32541	•	1 10			,	.,.	
April 5, 2004			L04000025621		. ,	^_^	
3. Date of filing/registration in Florida			4. Document number				
5. The name of the register Florida Department of S			address as shown on th	e records o	f the	·	
	285 Hwy. 98 East	Name					
	Address  Destin, Florida 32541  City, State and Zip						
6 The name and address of	-		•	Ĕ	, 10		
6. The name and address of the new registered agent and/or office:  Jeffrey T. Sauer			ощее.	** -		1	
Name 510 East Zaragoza Street				<b>#</b> En	Ph		
•	Florida street address (P.O. Box NOT acceptable)			<del>,</del>	PH 3:	a-94	
	Pensacola	FI 3250	02		21		
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 a member)							
Jerry L. Wallace							
(Printed or typed name of signee)	· _ · · · · · · · · · · · · · · · · · ·	·				-	
I hereby accept the appoil comply with the provision and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered ag s of all statules relative l accept the obligations his document is being fi that the limited liability	ent and ag to the prof of my pos led to mer company	ree to act in this capacit per and complete perfor ition as registered agent ely reflect a change in th has been notified in wri	ly. I further mance of m as provide he registere ting of this	r agree ly duti id for i id offic chang	es, in ie e.	

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

**FILING FEE: \$25.00**