

L04000030078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

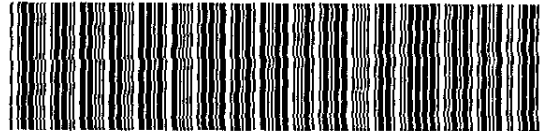
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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TIMOTHY H. CRUTCHFIELD, P.A.

Attorney at law
1401 Brickell Avenue
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Email: thcrutch@aol.com

August 2, 2005

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

Re: 620 Solar Isle Drive, LLC (document number L04000030078)

To whom it may concern:

Enclosed please find the following:

Articles of Amendment to Articles of Organization for the limited liability company named
"620 Solar Isle Drive, LLC"

Statement of Change of Registered Agent for the limited liability company named "620
Solar Isle Drive, LLC"

Also enclosed is a check for \$50 made payable to the Florida Department of State to cover the
\$25 filing fee for each of the above described documents. Thank you for your attention to this
matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Timothy H. Crutchfield', with a long horizontal flourish extending to the right.

Timothy H. Crutchfield

**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 limited liability company is: 620 Solar Isle Drive, LLC
2. The mailing address of the limited liability company is : 4600 Lee Highway
Arlington, VA 22207

04/20/2004

L04000030078

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:

Whitmire, Drennen L. Jr., Esq.

Name

249 Royal Palm Way, Suite 501

Address

Palm Beach, FL 33480

City, State and Zip

6. The name and address of the new registered agent and/or office:

Timothy H. Crutchfield, Esq.

Name

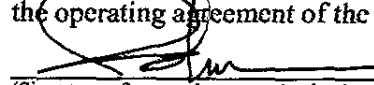
1401 Brickell Ave., Suite 1000

Florida street address (P.O. Box NOT acceptable)

Miami, FL 33131

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)

Robert E. Morris, Jr.

(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.


(Signature of Registered Agent)

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

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