

104 000033294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

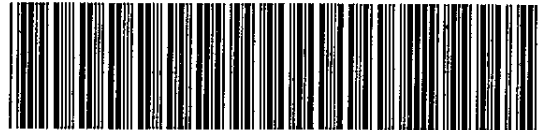
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**LARRY GEIMER & ASSOCIATES, CPAs, P.A.**

CERTIFIED PUBLIC ACCOUNTANTS

1515 RINGLING BLVD. • SUITE 890  
NORTHERN TRUST PLAZA  
SARASOTA, FLORIDA 34236  
(941) 951-2004 • FAX: 953-2863  
E-mail: [taxcpas@cpasarasota.com](mailto:taxcpas@cpasarasota.com)

**INSTRUCTIONS FOR FILING**

**Statement of Change of Registered Office or Registered Agent**

DATE 7/14/04

FOR: RICHHAWK, LLC

The attached copy is for your file. Be sure to mark this copy as to the date the original is signed and mailed.

The original should be signed and dated. ✕

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

DUE DATE..... As Soon As Possible

(X) PAYMENT DUE.....\$ 25.00

.Attach a check or money order payable to Division of Corporations.  
.Write your Document number on the check.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

September 15, 2004

LARRY GEIMER & ASSOCIATES, CPAS, P.A.  
1515 RINGLING BLVD., SUITE 890  
SARASOTA, FL 34236

SUBJECT: RICHHAWK, LLC  
Ref. Number: L04000033294

We have received your document for RICHHAWK, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 304A00054877

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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: RICHHAWK, LLC (BRISTOL ALLIANCE, LLC)
2. The mailing address of the limited liability company is: 1515 RINGLING BLVD.,  
SUITE 890, SARASOTA, FL 34236

- 4/30/2004 L04000033294
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:

AGENTS AND CORPORATIONS, INC.

Name

773 4TH AVENUE NORTH STE. E

Address

NAPLES, FL 34102

City, State and Zip

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

LARRY GEIMER, CPAs, P.A.

Name

1515 RINGLING BLVD, SUITE 890

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

SARASOTA, FL 34236

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]  
(Signature of a member or authorized representative of a member)

STEPHEN HAWKSWORTH  
(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]  
(Signature of Registered Agent)

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

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