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T. HAMPTON NOV 1 7 2009

EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: Shoppes a	t East Colonial, LLC	
	ed Liability Company	
Dear Sir or Madam:		
Don't Oil Oil Madain.		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Alan C. Charron Name of Person		
Name of Person		
Shannar at East Colonial 11.C		
Shoppes at East Colonial, LLC Firm/Company		
2345 W. Sand Lake Rd., Suite 100		
Address		
Orlando, FL 32809		
City/State and Zip Code		
6/1/_		
elan@realpropertyspecialists.com E-mail address: (to be used for future annual report notifica	tion)	
•		
For further information concerning this matter, pl	ease call:	
Alexa O. Oh avven		
Alan C. Charron at (Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section	
Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	Tananassee, 1 1011da 52514	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

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.

(Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) (Note: MAY BE POST OFFICE BOX) Orlando, FL 32809 L O QUO O 3 580 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Orlando, FL 32835 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is barebeen and the business office of the registered agent will be identical. Or, in the case of a Florida Entered liability company, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered of the manner of the limited liability company or as otherwise provided in the articles of organization of the manner of the limited liability company or as otherwise provided in the articles of organization of the opportunity agreement of the limited liability company. Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee	g, v. ser,e zree s, z eere	
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(b) Mailing address of limited liability company: 2345 W. Sand Lake Rd., Suite 100 (Note: MAY BE POST OFFICE BOX) Orlando, FL 32809 L-040003580 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Orlando, FL 32809 L-040003580 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address: NEW Registered Office Address: NEW Registered Agent: NEW Registered Office Address: NEW Registered Office Address: NEW Registered Office Address: NEW Registered Office Address: 2345 W. Sand Lake Rd., Suite 100 Orlando ,FL 32809 If the limited liability company is not organized under the laws of the State of Florida, it is bareby of only of the proper of the limited liability company or as otherwise provided in the case of a Florida Emited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative with the manufacture of the limited liability company or as otherwise provided in the articles of organization or the opyrating agreement of the limited liability company. Signature of the provisions of all statutes relative to the proper and complete performance of my duties. Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee Alan C. Charron Printed or typed name of signee	2. (a) Principal office address of limited liability compa	any: 2345 W. Sand Lake Rd., Suite 100
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Registered Agent: Registered Office Address: 6700 Conroy Rd., Suite 230 Orlando, FL 32835 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is bereby confirmed that after the change or changes are made, the Florida street address of the registered diffice and the business office of the registered agent will be identical. Or, in the case of a Florida Enited ilability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative of the mynthers 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 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 dulies and I am familiar with and accept the obligations of my position as registered agent agent as provided for in Chapter Off, F. S. Or, if this document is being filed to merely reflect a change in the registered office address, I kneep confirm that the limited liability company has been notified in writing of this change.	3. Date of filing/registration in Florida	4. Document number
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00