L04000036097

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Registration Section Division of Corporations	
	Investments, L.L.C. Name of Limited Liability Company)
Dear Sìr or Madam:	
The enclosed Registered Agent/Re	egistered Office Change and fee(s) are submitted for filing.
Please return all correspondence c	oncerning this matter to the following:
Stephen T. Ether	
(Name of Perso	n)
Buntin, Etheredge	e & Dowling, LLC
(Firm/Company	
	eet eet
185 N. Oates Stre	eet AT
(Address)	ASSS L
	開場 ま じ
Dothan, AL 3630	3 근무 등
(City/State and Zip	Code) \mathcal{R}° $\mathcal{U}_{\mathbf{x}}$
For further information concerning	this matter please call:
	, and matter, prease out.
	(22/) 702 227
Stephen T. Etheredge (Name of Person)	at (334) 793-3377
(Name of Ferson)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDR	
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	
Tallahassee, Florida 32301	Turidia 525 T
Enclosed is a check for th	e 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.

agent, or both, in the Stat	e of Florida.		5 5		_	
1. The name of the limit	ed líability company is	s: STE-II	Investments, L	L.C.		
2. The mailing address o	f the limited liability of	company is: _	185 N. Oates	Street,		
Dothan, AL						
May 12, 2004			L04000036	5097		
3. Date of filing/registration in Florida			4. Document number			
5. The name of the regist Florida Department of	ered agent and the reg State:	gistered office a	address as shown o	on the records	s of the	ē
	Corporation Ser		ny			
	1001 77 04	Name				
	1201 Hays St	Address				
	Tallahassee,					
	City	y, State and Zit	p	<u>_</u> 	~	
6. The name and address	of the new registered	agent and/or o	ffice:	ALLAHASSEE, FLORIDA	2006 APR -7	77
	Stephen T	. Etheredge	, Jr	HA:	30	
		Name	_	ŠEI		[T]
		a Vista Blv		੍ਹਾਂ ਹੈ। ਜਾਵ	3	ED
	Florida street addre	ess (P.O. Box P	NOT acceptable)	10g	PM 4:	
	Panama City	FL 3240	1		39	
	City,	State and Zip		Ci-r		
If the limited liability corconfirmed that after the cand the business office of liability company, it is he of the members of the lir or the operating agreement of the limited of a member or authority and the limited of a member of a member or authority and the limited of a member of a m	hange or changes are after the registered agent wereby confirmed that the nited liability companit of the limited liability.	made, the Flor will be identica he change(s) was otherway company.	ida street address and one in the case was/were authorized	of the registe of a Florida l d by an affirn	red off imited native	l vote
Stephen T. Etl	neredge S.					
(Printed or typed name of signee						
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm		agent and agre ive to the prope ons of my posit, o filed to merel lity company h	ee to act in this ca er and complete pe jon as registered a ly reflect a change as been notified in	pacity. I furt erformance of igent as provi in the registe writing of th	her ag f my di ided fo ered o) is cha	ree to uties, or in ffice nge.
85 1.77 Frage 2	Ub.					

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

(Signature of Registered Agent)