

L04000037383

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TALLAHASSEE, FLORIDA

3-23-07

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March 19, 2007

Registration Section
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

Re: CSB, LLC
Casa Grande Medical LLC
Concorde Drive LLC
Goodlette Medical LLC
Greentree of Naples LLC
Houchin LLC
Presidential Court I LLC
Presidential Court II LLC
Remington Holdings LLC

Dear Florida Department of State:

Enclosed are the following documents: (1) Resignation of Manager; (2) Change of Resident Agent and Registered Office; and (3) Amendment and Restatement of Articles of Organization, for each of the following Florida Limited Liability Companies:

1. Casa Grande Medical LLC
2. Concorde Drive LLC
3. Goodlette Medical LLC
4. Greentree of Naples LLC
5. Houchin LLC
6. Presidential Court I LLC
7. Presidential Court II LLC
8. Remington Holdings LLC

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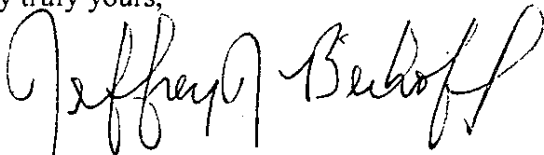
Also enclosed are the following documents: (1) Resignation of Manager and Member; (2) Change of Resident Agent and Registered Office; and (3) Amendment and Restatement of Articles of Organization for:

CSB, LLC, a Florida Limited Liability Company.

Please file these documents, file stamp the enclosed copy of each document and return the file-stamped copies to my attention in the envelope provided.

If you have any questions, please do not hesitate to call me.

Very truly yours,



Jeffrey J. Beihoff

JJB/sbf
Enclosure

C: Dr. and Mrs. Charles J. Burns (w/out enc)

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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: GOODLETTE MEDICAL LLC
2. The mailing address of the limited liability company is : 6225 Presidential Court, Suite C,
Ft. Myers, FL 33919

May 17, 2004

L04000037383

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:

Kevin M. Burns

Name

6060 Hidden Oaks Lane

Address

Naples, FL 34119

City, State and Zip

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

Charles J. Burns

Name

8665 Bay Colony Drive, #904

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

Naples

FL 34108

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.

Charles J. Burns

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

Charles J. Burns

(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.

Charles J. Burns

(Signature of Registered Agent)

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

FILING FEE: \$25.00

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