L0400003967

Cherie A. Binger 1614 Hillview Street Sarasota, FL 34239

October 27, 2004

800042404308

Division of Corporations Attn: Shawn Logan P.O. Box 6327 Tallahassee, FL 32314

RE: CAB, Limited Liability Corporation, Doc. No. L04000039672

Dear Ms. Logan:

This is to confirm our email correspondence of October 21, 2004 wherein you advised me to state in writing that the city of Sarasota had changed the property address of the above referenced LLC and its registered agent. I am enclosing a copy of a letter from the city in verification and the change request form. You further advised me that there would be no charge to make this correction. Thank you for your assistance.

Cherie A. Binger

Sincerely,

Attachments: City of Sarasota letter; change request form

11/2/OH Per 11/2/OH Per Bergo



July 28, 2004

Cherie A. Binger 1905 S. Orange Avenue Sarasota, FL 34239

Re: 1905 S. Orange—Change address for house to 1614 Hillview Street

Ms. Binger:

This is in response to your letter of July 16, 2004 requesting that your house with a current address of 1905 S. Orange Avenue (Property ID# 2037-15-0057) be given an address on Hillview Street since the house faces toward Hillview Street, and the driveway and primary access are from Hillview Street.

The Zoning Department has reviewed your request and conducted a site visit, and finds that such an address proposal is acceptable.

The new site address for your property will be 1614 Hillview Street.

It is a City requirement that residential buildings be posted with numbers at least four (4) inches in size, and clearly visible from the adjacent public right-of-way. You will need to post address numbers on your house to meet this requirement. It will be necessary for you to notify those who send you mail (creditors, insurance company, etc.) of your address change.

I will notify the Sarasota Post Office, Sarasota County Emergency Services, and other agencies of this change by copy of this letter.

Regarding relocating your mailbox from Orange Avenue to Hillview Street, you will need to contact the post office to find out their specifications as to where the box must be located, height, etc.

Sincerely,

Gerald (Buster) Chapin Senior Zoning Analyst

c: Joe Fuger, IST Department

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.

agen, or bon, in the state of the state
1. The name of the limited liability company is: CAB, Limited Liability Company
2. The mailing address of the limited liability company is:
1614 Hillview St., Sarasota, Fl 34239
5/25/04 3. Date of filing/registration in Florida L0400039672 4. Document number
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: Chevie A. Binger Name 1905 5. Orange Five. Address Sarasofa, Fl. 34239 City, State and Zip
6. The name and address of the new registered agent and/or office:
Name 1614 Hilly lew Street Florida street address (P.O. Box NOT acceptable) Savasota, FL 34239 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)
Cherie A. Binger (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

INHS18(10/99)

FILING FEE: \$25.00