U04000055816

**50,00

Jeff rey D. Lavenhar Requestor's Name) Tavernier Development flut. 5335 S. Birch Court (Address) (Address) Alenwood Village (D 8012)	000042733890
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	11/22/0401012018 **50.
. (Document Number) Certified Copies Certificates of Status	O4 NOV 22 PH 5: 39
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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 limite	ed liability company is:	Tavernie	r Development Pa	artners, LLC		
2. The mailing address o						, FL
34951			<u>.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
July 28, 2004			LO4000055816			
3. Date of filing/registrat	ion in Florida	4. Document number		****		
5. The name of the register Florida Department of		tered office	address as shown o	on the records	of the	
-	Coastal Developme	nt Partner	s, LLC			
	9402 Meadowood D	Name Drive				
		Address	· · · · · · · · · · · · · · · · · · ·			
	Ft. Pierce, FL 3495					
	City, S	State and Z	ip	£;		
6. The name and address	of the new registered ag	ent and/or o	office:		041	
	Jeffrey D. Lavenhar	•		27 A	04 NOV 22	
	1936 Harbortown Di	Name rive, Unit E	-19	\$		Company
	Florida street address	(P.O. Box	NOT acceptable)	7:	PH	112
	Ft. Pierce	FL 3494	6	T.L. HIDA	5: 39	No. of
	City, St	tate and Zip		D , ,		
If the limited liability conconfirmed that after the cland the business office of liability company it is her the members of the limite the operating agreement of the limited that the limited liability concentration of the limited liability company in the	hange or changes are ma the registered agent will reby confirmed that the d liability company or a of the limited liability co	ade, the Flor il be identicated thange(s) was otherwise ompany.	rida street address of al. Or, in the case of vas/were authorized	of the registere of a Florida lind thy an affirm:	ed offi mited ative v	nte of
(Signature of a member or author	ized representative of a member	r)				
Jeffrey D. Lavenhar						
(Printed or typed name of signee)						
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or if address, I hereby confirm (Signature of Registered Agent)		ent and agr to the prop t of my posit led to mere v company l	ree to act in this cap er and complete pe tion as registered a ly reflect a change ias been notified in	pacity. I furth reformance of gent as provid in the register writing of thi	er agr my du ded foi red off s chan	ee to ties, r in fice ige.

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

INHS18(10/99)

FILING FEE: \$25.00