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www.oldsouthexchange.com

July 21, 2005

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

Ref: Exchange Realty VI, LLC

Dear State of Florida,

The enclosed check for \$105.00 is to transfer ownership of Exchange Realty VI, LLC, a Florida limited liability company to Old South Homes, Inc. a Florida corporation. The check is to cover:

\$30.00	Transmittal Letter
\$25.00	Resignation of Member
\$25.00	Statement of Change of Registered Agent
\$25.00	Articles of Amendment

The transfer of ownership is the final phase of an Internal Revenue Section 1031 Reverse Exchange.

Should you have any questions, please contact me at the above office numbers.

Regards,

Andrew W. Gustafson

Managing Member of Exchange Realty, LLC, Managing Member of Exchange Realty VI, LLC

Office: 850-837-3043 • Toll Free: 800-977-1031 • Fax: 850-837-0874

## 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:	Exchange R	REALTY V	1, LLC
2. The mailing address of the limited liability comp	pany is: 151 RE	Blows Wx	4, SUITE 3-D
	DESTIN,	, Francos	32541
8-5-04	L040	0005800	8
3. Date of filing/registration in Florida	4. Docum	nent number	
5. The name of the registered agent and the register Florida Department of State:			records of the
U. MICHAEL	CHESSER_ ame	•	
1201 N. 44	IN PARKWA	4	
D. MICHAEL  N  1201 N. GG  SHRLIMAR, FI  City, Ste	dress  AZIDA 375  ite and Zip	19	SEGRETARY DIVISION OF CO
6. The name and address of the new registered agen	t and/or office:		- FAT
ANDREW M.S	BENO		PH PH
ANDREW W. S Nai 56 TRANSMILLY	ne Lane		STATEHORATIONS
Florida street address (F			9 **
DESTIN	L 32541	. <u>81,52.</u>	
City, State	and Zip		
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the change the members of the limited liability company or as of the operating agreement of the limited liability company.	the Florida street a	address of the	registered office
(Signature of a member or authorized representative of a member)		. –	
ANDREW W. GUSTARON			
(Printed or typed name of signee)	<del></del>	· 5.	
I hereby accept the appointment as registered agen comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this socument is being file address, I hereby confirm that the limited liability co	t and agree to act in the proper and com my position as regi d to merely reflect a ompany has been no	this capacity uplete perform istered agent o change in the otified in writi	. I further agree to nance of my duties, as provided for in registered office ng of this change.
(Signature of Registered Agent)	garanga et ett.		
Division of Cornerations, P.O.	Box 6327. Tallahas	see, FL 3231	4

**FILING FEE: \$25.00** 

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