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SECRETARY OF STATE

COVER LETTER

Division of Corporations	•		
SUBJECT: Allied Capital and Development of South Florida, UC (Name of Limited Liability Company)			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter	to the following:		
a) icholas A. Mastroianni, 1 (Name of Person)	<u>I</u>		
Allied Capital and Dave lop Mon (Firm/Company)	tof South Florida, LLC		
3300 PL-A Blvd. Swite 330 (Address) (Address)			
Palm Boach Gardens, FL 3346 (City/State and Zip Code) (City/State and Zip Code)			
For further information concerning this matter, please c			
Nicholas A. Mastroimmi at (56) (Name of Person)	(Area Code & Daytime Telephone Number)		
Registration Section F Division of Corporations E Clifton Building F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the 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 com, in the state of Lorida.
1. The name of the limited liability company is: ALLIED CAPITAL AND DEVELOPMENT OF SOUTH FLORIDA, LLC.
2. The mailing address of the limited liability company is:
3300 PGA Blvd., Süite 330, Palm Beach Gardens, .FL 33410
8/17/2004 L04000061042
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:
Roger C. Stanton
Name 4420 Beacon Circle
Address
West Palm Beach, FL 33410 City. State and Zip
6. The name and address of the new registered agent and/or office: Ni cholas A. Mastrojanni II
Managar II. Haberorumi, 11
3300 PGA Blvd., Suite 330
Florida street address (P.O. Box NOT acceptable)
Palm Beach Gardens, FL 33410
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 optrating agreement of the limited liability company.
(Signature of a member or authorized representative of a member)
Nicholas A. Mastroianni, II, Managing Member
(Printed or typed pame of signee)
Thereby 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 the provided for in the registered accept the obligations of my position as registered agent as provided for in the registered office and the provided for in the registered of the second of th

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

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FILING FEE: \$25.00