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SECRETARY OF STATE CIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MDR LAND DEVELOPMEN (Name of Limite	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
John F. Murray, Esq. (Name of Person)	
John F. Murray, Esq. (Firm/Company)	
21 Old Kings Road, N., Suite B-110 (Address)	7 SEP -4 PM 2: 53
Palm Coast, FL 32137	A 2:
(City/State and Zip Code)	
For further information concerning this matter, ple	ease call:
John F. Murray, Esq. at (386) 445-1701
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amo	ount:
\$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.

1. The name of the limited liability company is:		
2. The mailing address of the limited liability co	ompany is : 29-40 Francis Lewis E	Blvd, Flushing NY
11358		
August 27, 2004	L04000063514	
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registered agent age	stered office address as shown on the	ne records of the
Janine Candido		
	i∖\ame	
29 Covington Lane	Address	
Palm Coast, FL 32		•
City,	State and Zip	0 000
6. The name and address of the new registered agent and/or office:		FILED STATEHS WISION OF CORPORATIONS OF SEP -4 PH 2: 53
John F. Murray, Esq.		
21 Old Kings Road	Name I, N., Suite B-110	PH ?
Florida street addres	s (P.O. Box NOT acceptable)	2: 53
Palm Coast, FL	FL 32137	S
City, S	State and Zip	
If the limited liability company is not organized confirmed that after the change or changes are n and the business office of the registered agent w liability company, it is hereby confirmed that the of the members of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company contains agreement of the limited liability contains agreement	nade, the Florida street address of the vill be identical. Or, in the case of a e change(s) was/were authorized by or as otherwise provided in the article ty company.	he registered office Florida limited an affirmative vote
Lohn F. Murray (Printed or typed name of signer)		
I hereby accept the appointment as registered a comply with the provisions of all statutes relative and Lam familiar with and accept the obligation Chapter 608, F.S. Or, if this document is being address, I hereby confirm that the limited liability (Signature of Registered Agent)	agent and agree to act in this capace to the proper and complete performs of my position as registered agential filed to merely reflect a change in the company has been notified in wr	

FILING FEE: \$25.00