Florida Department of State

Division of Corporations Public Access System

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Account Name : AKERMAN SENTERFITT - TAMPA

Account Number : 120000000249

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: (813)223-7333

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REGISTERED AGENT CHANGE

P & D INVESTMENT PROPERTIES, LLC

Certificate of Status	0
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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 of liability company submits the following statement agent, or both, in the State of Florida.	r 608.508, Florida Statutes, the understaned limited in order to change its registered office or registered	
1. The name of the limited liability company is: P	& O Investment Properties, LLC	
2. The mailing address of the limited liability comp	pany is : 16319 Sámbourne Lane, Tampa, FL	
33647	,	
09/10/2004	L04000066694	
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:		
Alleen S. Davis		
	ame Suite 1500 dress	
100 S. Ashley Drive,	Suite 1500	
Tampa, FL 33602	dress	
City, Sp.	ate and Zip – – – – Si	
6. The name and address of the new registered agen	·	
American Information	ın <u>Services, Inc.</u>	
کی Name 401 E. Jackson Street, Suite 1700		
Florida street address (P.O. Box NOT acceptable)		
Tampa g	FL 33602	
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) (Printed or wheel name of signate)		
(Signatura of Registered Agent) Deborah L. Evans Division of Corporations, P.O.	nt and agree to act in this capacity. I further agree to be interproper and complete performance of my duties, of my position as registered agent as provided for in a to merely reflect a change in the registered office company has been notified in writing of this change. Box 6327, Tallahassee, FL 32314 FEE: \$25.00	
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