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(Re	equestor's Name)	
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## Duane Morris\*

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DIRECT DIAL: 215.979.1249
E-MAIL: bruski@duanemorris.com

www.duanemorris.com

October 19, 2005

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

La Place du Bateau, LLC - File No. D1708-00009

Dear Madam or Sir:

Re:

Enclosed please find the original and one copy of a Statement of Change of Registered Office or Registered Agent or Both for the above entity. Our check in the sum of \$25 is also enclosed to cover the filing fee. Please file the Statement of record and return a date-stamped copy to me in the self-addressed, stamped envelope provided for your convenience. If you have any questions, please feel free to contact me.

Thank you.

Very truly yours,

Ann Marie Bruski Ann Marie Bruski

Paralegal

amb enclosures

cc: Matthew C. Jones, Esquire (w/attachment)

PHI\1500944.1

2005 OCT 28 PM 3: 03
SECRETARY OF STATE
ORIDA

## 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 limit	ed liability company is: $\_$	La Place du Bateau, LLC	
		pany is: 201 W. Centre St	reet,
Mahanoy City, PA 17		. <u> </u>	
9/24/2004		L04000069815	
		4. Document num	ber
5. The name of the regist Florida Department of	State:	red office address as shown or	the records of the
	Corporation Service	Jame	
	1201 Hays Street	varme	7:0
		idress	2005 OCT 28 SECRETAR'S STAFLAHASS
	Tallahassee, Florida		至 二
	City, St	ate and Zip	28 28
6. The name and address	of the new registered ager	nt and/or office:	PM 3: 03
	Henry Winkler		الله الله
	100 N.E. 20th Terrace	me 3	RICK OS
	Florida street address (	P.O. Box NOT acceptable)	
	Deerfield Beach	<sub>FL</sub> 33441	
	City, Sta	te and Zip	
confirmed that after the cand the business office o liability company, it is he the members of the limit the operating agreement	change or changes are mad f the registered agent will	der the laws of the State of Fle, the Florida street address of the identical. Or, in the case change(s) was/were authorized otherwise provided in the artipany.	f the registered office of a Florida limited
-			
William G. Brayford, V (Printed or typed name of signee			
I hereby accept the apportunity with the provision and I am familiar with an Chapter 608, F.S. Or, if address, thereby confirm	•	nt and agree to act in this cap of the proper and complete pe of my position as registred a ed to merely reflect a change company has been notified in	pacity. I further agree to reformance of my duties, gent as provided for in in the registered office writing of this change.
(Signature of Registered Agent)	on of Cornorations, P.O.	Box 6327. Tallahassee, FL	32314

**FILING FEE: \$25.00** 

INHS18(10/99)