L04000073607

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000221245 3)))

H080002212453ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Please file AS OK 9/23/08

To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : AGENTS AND CORPORATIONS, INC
Account Number : I20010000112
Phone : (302)575-0875
Fax Number : (302)575-0925

FILED
08 SEP 23 AM 8:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

REGISTERED AGENT CHANGE

HORIZON PERDIDO, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$35.00

Electronic Filing Menu Corporate Filing Menu Help

N. Gulligan OCT 1 - 2008

September 30, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AGENTS AND CORPORATIONS

SUBJECT: HORIZON PERDIDO, LLC
REF: L04000073607

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Document Specialist

FAX Aud. #: H08000221245
Letter Number: 608A00051348

RECEIVED
2008 SEP 30 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 – Tallahassee, Florida 32314

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. Name of the limited liability company: HORIZON PERDIDO, LLC

2. (a) Principal office address of limited liability company: 18954 County Road 10, Foley, AL 36535
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 18954 County Road 10, Foley, AL 36535
(Note: MAY BE POST OFFICE BOX)

3. Date of filing/registration in Florida: 10/11/2004

4. Document number: L04000073607

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: CT CORPORATION SYSTEM

Registered Office Address: 1200 South Pine Island Road, Plantation, FL 33324

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: Agents and Corporations, Inc.

NEW Registered Office Address: 800 Fifth Avenue South, Suite 101-390
(MUST BE FLORIDA STREET ADDRESS)
Naples, FL 34102

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 certified 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)

James B. Sides
(Printed or typed name of signer)

FILED
08 SEP 23 AM 8:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I hereby 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 Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: $25.00

INH818 (05/08)