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. Law Offices JENNIFER COLSON, P.A.

P.O. Box 50028 Lighthouse Point, Florida 33064 (954) 784-2290 Telephone (954) 784-2770 Facsimile

August 23, 2005

Amendment Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

RE: Registered Agent Amendments

To Whom It May Concern:

Enclosed please find Statements of Change of Registered Office for the following companies:

Corporations

- 1. Jennifer Colson, P.A.
- 2. Colson Construction Corporation
- 3. J.E.C. Aviation

Limited Liability Companies

- 1. Pinetree Lofts, LLC
- 2. Lake Santa Barbara Townhouse Partners, LLC

I have also enclosed my firm check in the amount of \$155.00 representing \$105.00 for the corporation changes and \$50 for the LLC changes.

Please do not hesitate to contact this office should you have any further questions.

Sincerely,

Jennifer Colson

JC/lp

enclosures

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.

		Pinetree Loffs LLC	
1. The name of the limit			·····
2. The mailing address of	of the limited liability co	mpany is : P.O. Box 50028	, Lighthouse Point, FI 3
October 13, 2004		L04000074260	
3. Date of filing/registration in Florida		4. Document nur	mber
5. The name of the regist Florida Department of	ered agent and the regist	tered office address as shown	on the records of the
Fiorida Department of	Jennifer Colson		
	2265 N.E. 24th ST	Name	-
		Address	05 AUG 24 PH 1: 1 ALLAHASSEE FLOR
		State and Zip	25 5
6. The name and address	of the new registered ag	ent and/or office:	
	Jennifer Colson		E R
	2751 N.W. 19th St	Name	
	Florida street address	(P.O. Box NOT acceptable)	P
	Pompano Beach	FL 33069	
	City, St	ate and Zip	
confirmed that after the cand the business office of	hange or changes are ma the registered agent will reby confirmed that the ad liability company or a of the limited liability co	。	of the registered office of a Florida limited
Edward Colson			
(Printed or typed name of signee)			
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if t address, I hereby confirm	intment as registered ag is of all statutes relative d accept the obligations his document is being fi that the limited ljability	ent and agree to act in this ca to the proper and complete pe of my position as registered a led to merely reflect a change company has been notified in	pacity. I further agree to erformance of my duties, agent as provided for in in the registered office a writing of this change.
(Signature of Registered Ment)	} 	. , , , , , , , , , , , , , , , , , , ,	•

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