## L0400015300

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
(Bus	siness Entity Nam	e)
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Certified Copies	Certificates	of Status
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## COVER LETTER

Division of Corporations	
SUBJECT: Axiom Development/Walto (Name of	n Way II, L.L.C. Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Gary B. Leuchtman	
(Name of Person)	
Beggs and Lane (Firm/Company)	<del></del>
501 Commendencia Street  (Address)	
Pensacola, Florida 32502	
(City/State and Zip Code)	
For further information concerning this mat	tter, please call:
Gary B. Leuchtman	at (850 ) 432-2451
(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	ing amount:
	\$55 Filing Fee & Certified Copy

\*TO: Registration Section

## 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.

2. The mailing address of the limited liability company is:  101-A Business Centre Drive, Destin, Florida 32550  10/18/2004  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:  Herman L. Neese, Jr.  Name  101-A Business Centre Drive  Address  Destin, Florida 32550  City, State and Zip  6. The name and address of the new registered agent and/or office:  Gary B. Leuchtman  Name  501 Commendencia Street  Florida street address (P.O. Box NOT acceptable)  Pensacola  FL 32502  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 address of the registered office address of the registered 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 #Tollimited liability company.  (Signature of a member or authorized representative of a member)
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Name  101-A Business Centre Drive  Address  Destin, Florida 32550  City, State and Zip  6. The name and address of the new registered agent and/or office:  Gary B. Leuchtman  Name  501 Commendencia Street  Florida street address (P.O. Box NOT acceptable)  Pensacola  FL 32502  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.  Mathamathy
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(Signature of a member or authorized representative of a member)
(Signature of a member or authorized representative of a member)
(Printed or typed name of signee)  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 auties, and I am familiar with that accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or lift his abcument is being filed to merely reflect a change in the registered office address whereby confirm that the limited liability company has been notified in writing of this change.  (Signature of Registered Kent)
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

**FILING FEE: \$25.00**