- 404000084033

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
•					
Special Instructions to Filing Officer:					
A. LUNT					
1 · • •					
JAN 26 2010					
EXAMINER					

Office Use Only



01/21/10--01016--002 **25.00

COVER LETTER

Division o	of Corporations					
SUBJECT:	Flagship Lake C				LC	
	Name of	Limited Lie	ability Comp	any		
Dear Sir or Mada	m:					
The enclosed Reg	gistered Agent/Registered	Office Char	nge and fee(s) are submitted for	r filing.	
Please return all c	correspondence concernin	g this matte	r to the follov	wing:		
	Ronald E. Roberts					
	Name of Person					
Flagship Lake	County Development N	umber V, L	LC		2010 JAN SECRETALIAHA	77
2406 C	Cypress Glen Drive Suit	e 102			22 SSE	
w	resley Chapel, FL 3354	3			AM II: II OF STATE EE, FLORID	O
	City/State and Zip Code				Þ	•
rroberts E-mail address: (@flagshipdevelopment to be used for future annual report	lic.com notification)				
For further inform	nation concerning this ma	tter, please o	eall:			
Ror	nald Roberts	at (81	3)	907-0077		
	ne of Person	_ "' (Daytime Telephone Nu	mber	
Registration Division of Clifton Bui 2661 Execu	Corporations]	MAILING Al Registration So Division of Co P.O. Box 6327 Fallahassee, Fl	ection orporations		
Enclosed	is a check for the follow	ing amount	•			
\$25.Fil	\$25. Filing Fee \$55 Filing Fee & Certified Copy					

INHS18 (5/08)

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: Flagship La	<u>ike County Development N</u>	lumber V _a			
2. (a) Principal office address of limited liability company	2406 Cypress Glen Drive				
(Note: MUST BE STREET ADDRESS)	Suite 102 P Wesley Chapel, FL 33543	2010			
(b) Mailing address of limited liability company:		JAN 22			
(Note: MAY BE POST OFFICE BOX)	same as above				
11/18/2004 3. Date of filing/registration in Florida	L04000084033 4. Document number	FSTATE I			
		T>			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of	f State:			
Registered Agent:	Theodore A. Bolin				
Registered Office Address:	5323 Millenia Lakes Boulevard Sulte 121				
	Orlando, FL 32803				
(b) Enter name of NEW Registered Agent and/or NEV	W Registered Office address:				
NEW Registered Agent:	Ronald E. Roberts				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2406 Cypress Glen Drive Suite 102 Wesley Chapel ,FL 33543				
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					
Theodore A. Bolin	_				
Printed or typed name of signee		_			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutegrelative to the provision of all statutegrelative to the provision of any post of the obligations of my post chapter body. F.S. Or it his document is being filed to met address of hereby confirm that the limited liability company	gree to act in this capacity. I furt oper and complete performance of sition as registered agent as provi rely reflect a change in the registe has been notified in writing of th	her agree to my duties, ded for in red office is change.			
Signature of Registered Agent					

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