## 404000086372

(Requestor's Name)	
(Addross)	
(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:	

Office Use Only

N. CAUSSEAUX DEC 2 3 2009 EXAMINER

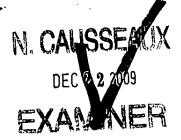


800162187708

12/22/09--01020--001 \*\*500.00

Change of RA

LO4-8 GENEROLES



## 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: HF	RH Design Associates, L.L.C.	
2. (a) Principal office address of limited liability company:		
(Note: MUST BE STREET ADDRESS)	319 Pablo Road Ponte Vedra Beach, Florida 32082	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)	Same	
11/30/2004	L04000086382	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of sate:	
Registered Agent:	John S. Duss, IV, Esq.	
Registered Office Address:	Ford, Bowlus, Duss, Morgan, Kenney, S 10110 San Jose Boulevard Jacksonville, Florida 32257	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	EW Registered Office address:  John S. Duss, IV	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Duss, Kenney, Safer, Hampton & Joos 4348 Southpoint Boulevard, Suite 101 Jacksonville ,FL32216	
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 of authorized representative of a member		
John S. Duss, IV, Authorized Person Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statules relative to the p and I am familiar with and accept the obligations of my p Chapter 608, E.S. Or, if this document is being fited to maddress, I hereby confirm that the limited tiability companions of Registered Agent	agree to act in this capacity. I further agree to roper and complete performance of my duties, position as registered agent as provided for in the registered office ny has been notified in writing of this change.	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		

**FILING FEE: \$25.00** 

INHS18 (05/08)