

L04000090385

Robert M. Schwartz
(Requestor's Name)

4700 NW Boca Raton Blvd
(Address)

Suite 104
(Address)

Boca Raton, FL 33431-
(City/State/Zip/Phone #) 4860

☒ PICK-UP ☐ WAIT ☐ MAIL

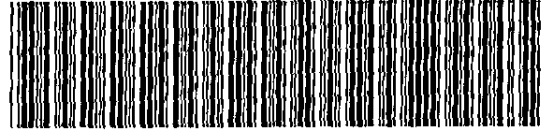
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

L04-90385-
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 29, 2005

ROBERT SCHWARTZ
4700 NW BOCA RATON BLVD., SUITE 104
BOCA RATON, FL 33431-4860

SUBJECT: THE VILLAGES OF OCEAN SHORES LLC
Ref. Number: L04000090385

We have received your document for THE VILLAGES OF OCEAN SHORES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 305A00030111

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TALLAHASSEE, FLORIDA

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. The name of the limited liability company is: The Villages of Ocean Shores, LLC.

2. The mailing address of the limited liability company is: _____

10655 NE 4th St. Ste. 400 Bellevue, WA 98004

December 14, 2004

3. Date of filing/registration in Florida

L04000090385

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:

Robert M. Schwartz

Name

102 North Swinton Ave.

Address

Delray Beach, FL 33444

City, State and Zip

6. The name and address of the new registered agent and/or office:

Robert M. Schwartz

Name

4700 NW Boca Raton Blvd. Suite 104

Florida street address (P.O. Box NOT acceptable)

Boca Raton, FL 33431-4860

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.

(Signature of a member or authorized representative of a member)

BENJAMIN PARSON

(Printed or typed name of signer)

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)

Robert M. Schwartz

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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