

L04 000090923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

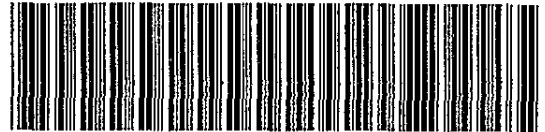
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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Charlotte 1000 LLC  
(Name of corporation)

**DOCUMENT NUMBER:** L04000090923

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

c/o Robert Grammen  
(Name of contact person)

Charlotte 1000 LLC  
(Firm/Company)

9180 Galleria Court, Suite 600  
(Address)

Naples, FL 34109  
(City/state and zip code)

For further information concerning this matter, please call:

Robert L. Abbott at ( 214 ) 969-4900  
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

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TALLAHASSEE, FLORIDA

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**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: Charlotte 1000 LLC
2. The mailing address of the limited liability company is : 3540 Forest Hill Blvd., Suite 203,  
West Palm Beach, Florida 33406

December 15, 2004

L04000090923

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:

Alan I. Armour II

Name

1645 Palm Beach Lakes Blvd., Suite 1200

Address

West Palm Beach, Florida 33401

City, State and Zip

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

c/o Robert Grammen

Name

9180 Galleria Court, Suite 600

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

Naples, FL 34109

City, State and Zip

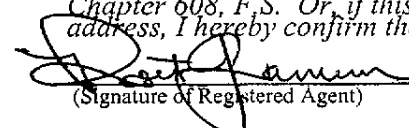
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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)

By: John E. Ayres, Jr., Manager of Whitecaps Hotel Partners II, L.L.C., Sole 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 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 Grammen

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

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