L04000093538

(Requestor's Name)					
CUTSHAW PO. BOX 3133 PENSACOLA, FL 32516-3133					
(City/State/Zip/Phone #)					
,,					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Dadiness Litaly Harris)					
(Document Number)					
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(8/03/05--01015--002 **25.00

DIVISION OF CORPORATIONS

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

· ·				
liability company submits agent, or both, in the State	s the following sto e of Florida.	atement in order	r to change its regi	s, the undersigned limited stered office or registered
1. The name of the limite	d liability compar	ny is: Lightspr	ing Properties, LL	C
2. The mailing address of				
December 27th, 2004		- ···· - · · · · · · · · · · · · · · ·	L04000093538	3
3. Date of filing/registration	ion in Florida		4. Document nun	aber
5. The name of the register Florida Department of	State:	registered office		on the records of the
	· 			
Address Naples, FL 34102				95 N
	-	City, State and 2	Zip	등 鷄
6. The name and address	of the new registe	red agent and/or	office:	υ ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο
Darrell Cutshaw				
	8105 Westbourne Dr.			SECRETARY OF STATIONS NISION OF CORPORATIONS 05 AUG -3 PM 3: 16
Florida street address (P.O. Box NOT acceptable)				6 5
	Pensacola	_{FL} 325	16-3133	
	C	City, State and Zi	p	
If the limited liability come confirmed that after the cleand the business office of liability company, it is her the members of the limite the operating agreement of the limited liability company and the limited liability company of the liability company o	nange or changes the registered age reby confirmed the diability compared the limited liabi	are made, the Flent will be identiat the change(s) by or as otherwishity company.	orida street address cal. Or, in the case was/were authorized	of the registered office of a Florida limited d by an affirmative vote of
Darrell Cutshaw				
(Printed or typed name of signee)			• • • • • • • • • • • • • • • • • • •	* *
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm	intment as registes is of all statutes re d accept the oblig his document is b that the limited li	red agent and agelative to the progrations of my posteing filed to men tability company	ree to act in this ca per and complete po ition as registered a rely reflect a change has been notified it	pacity. I further agree to erformance of my duties, igent as provided for in in the registered office i writing of this change.
	tu		tiga og sikke ekterikasi. Silender og sikke	

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

INHS18(10/99)

FILING FEE: \$25.00