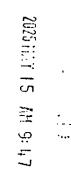
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Office Use Only

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## COVER LETTER

TO: Registration Se Division of Co			
SUBJECT: Howard P	roperties LLC		
	Nar	ne of Limited	d Liability Company
Dear Sir or Madam:			
The enclosed Registere	ed Agent/Registered Of	fice Change	and fee(s) are submitted for filing.
Please return all corres	pondence concerning th	nis matter to	the following:
Brenda Schiff			
	Name of Person		
Howard Properties LLC			
	Firm/Company	-	
26484 Hickory Blvd			
	Address		
Bonita Springs, FL 3413	1		
С	ty/State and Zip Code		
brenjs@bellsouth.net			
E-mail address: (	to be used for future an	nual report n	otification)
For further information	concerning this matter	, please call:	
Brenda Schiff		at ( <sup>954</sup>	, 802-2000
Name	of Person		Area Code & Daytime Telephone Number
STREET/CO	URIER ADDRESS:		MAILING ADDRESS:
Registration S			Registration Section
Division of Co			Division of Corporations
Clifton Buildin	ng e Center Circle		P.O. Box 6327
Tallahassee, F			Tallahassee, Florida 32314
Enclosed is a	check for the following	g amount:	
🔑 \$25 Filing I			\$55 Filing Fee & Certified Copy

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

. Na	ame of the limited liability company: Howard Propertie	es LLC	
2. (a)	26484 Hickory Blvd	(h)	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Bonita Springs, FL 34134		
	1/21/2005		0006733
•	Date of filing/registration in Florida	4.	Document number
. (a)	Brenda J Schiff		
	Registered Agent and Registered Office shown on the records of 26484 Hickory Blvd	the Florida Dept	of State
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS]	2025
	Bonita Springs . F1	34134	2025 Figy 15
(b)	Registered Agents Inc		5 <del>8</del> :
` '	Enter name of NEW Registered Agent and/or NEW Registered	d Office address.	
	7901 4th St N		9: 4.7
	NEW Registered Office Address.		
	STE 300		<del></del>
	St. Petersburg	33702	
ne cha gent v vas/we ne arti	imited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the star in the case of a member or authorized representative of a member	of the registered iability compart of the limited I	office and the business office of the register by, it is hereby confirmed that the change(s) liability company or as otherwise provided in ty company.
here.	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address.	gree to act in the e performance of ed for in Chapt	is capacity. I further agree to comply with t of my dutics, and I am familiar with and acc er 605. F.S. Or. if this document is being fit