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PLEASE REPLY TO CLEARWATER

FILE NO.

May 1, 2007

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Bay Knot Office, LLC

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company for the above-referenced corporation together with a check in the amount of \$25.00 to cover the cost of filing.

If you have any questions, please feel free to contact me.

Sincerely,

JOHNSON, POPE, BOKOR,  
RUPPEL & BURNS, LLP

*Raina M. Sullivan*

Raina M. Sullivan  
Administrative Assistant

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TALLAHASSEE, FLORIDA

#403920 v1 - BayKnotOfficeLtr.DivisionofCorp.

CLEARWATER OFFICE  
911 CHESTNUT ST.  
POST OFFICE BOX 1368 (ZIP 33757-1368)  
CLEARWATER, FLORIDA 33756  
TELEPHONE (727) 461-1818  
TELECOPIER (727) 462-0365  
TELECOPIER (727) 441-8617

TAMPA OFFICE  
403 EAST MADISON ST.  
SUITE 400  
POST OFFICE BOX 1100 (ZIP 33601-1100)  
TAMPA, FLORIDA 33602  
TELEPHONE (813) 225-2500  
TELECOPIER (813) 223-7118

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BAY KNOT OFFICE, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARC RUTENBERG  
(Name of Person)

MARC RUTENBERG HOMES, INC.  
(Firm/Company)

8750 Hawbuck Street  
(Address)

Trinity, FL 34655  
(City/State and Zip Code)

For further information concerning this matter, please call:

Marc Rutenberg at ( 727 ) 945-0077  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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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: Bay Knot Office, LLC

2. The mailing address of the limited liability company is: 8750 Hawbuck Street, Trinity, FL 34655

1/25/2005  
3. Date of filing/registration in Florida

L0500007756  
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:

ROGER A. LARSON  
Name

911 Chestnut Street  
Address

Clearwater, Florida 33756  
City, State and Zip

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

Marc Rutenberg  
Name

8750 Hawbuck Street  
Florida street address (P.O. Box NOT acceptable)

Trinity, FL 34655  
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)

Marc Rutenberg  
(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)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00

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