

# LD5 0000 13408

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Name  
Availability

Document  
Examiner

DOC

Modeler

DOC

Reviewer  
Verifier

DOC

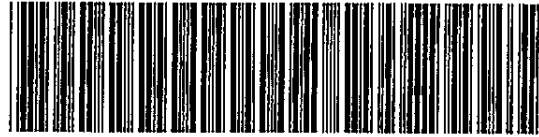
Indiv. Judgment

DOC

W. P. Verifier

DOC

Office Use Only



100056559301

08/19/05--0016--0001 \*\*12-00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2005-08-19 10:25

100056559301

THE DUNLAP LAW FIRM, LLC  
2964 PEACHTREE ROAD  
BUCKHEAD CENTRE - SUITE 300  
ATLANTA, GEORGIA 30305

TELEPHONE 404-816-4034  
TELECOPY 404-816-4035

R. HUNT DUNLAP, JR.  
DIRECT DIAL: 404-816-4095  
E-MAIL: [HDUNLAP@DUNLAPLAW.COM](mailto:HDUNLAP@DUNLAPLAW.COM)

August 1, 2005

Florida Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**RE: Filing Statement of Change of Registered Office or Registered Agent or Both  
for Limited Liability Company**

Dear Sir or Madam:

Enclosed are Statements of Change of Registered Office for the following companies:

1. Southwoods, LLC;
2. Coastal Cottage, LLC;
3. Penthouse, LLC;
4. 2 Bucks, LLC; and
5. Sunrise/Sunset, LLC.

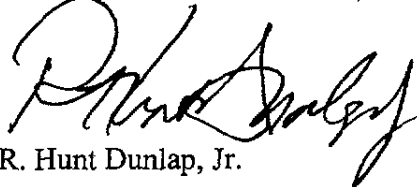
I have also enclosed a check in the amount of \$125.00 for filing fees for the five companies.

Should you have any questions concerning this matter, please give me a call.

Best regards.

Very truly yours,

THE DUNLAP LAW FIRM, LLC



R. Hunt Dunlap, Jr.

**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: Southwoods, LLC
2. The mailing address of the limited liability company is: P.O. Box 630, Eastpoint, FL 32328

2/4/2005

L05000013408

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:

John R. Moody

Name

140 Griffin Avenue

Address

Port St. Joe, Florida 32456

City, State and Zip

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

John R. Moody

Name

1752 Lilac Lane

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

St. George Island FL 32328

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.

John R. Moody

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

John R. Moody

(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.*

John R. Moody

(Signature of Registered Agent)

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