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SECRETARY UT STATE

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Axiom Development/Front Beach (Name of Limited	Development, L.L.C. Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office O	Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this m	atter to the following:		
Gary B. Leuchtman			
(Name of Person)			
Beggs and Lane (Firm/Company)	· ·		
(t titll Company)			
501 Commendencia Street			
(Address)			
Pensacola, Florida 32502			
(City/State and Zip Code)	 		
For further information concerning this matter, plea	ase call:		
Gary B. Leuchtmanat (8	350) 432-2451		
(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 amo	ount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

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 limit	ed liability compan	ny is: Axiom Deve	lopment/Front Beach Deve	elopment, L.L.C.
2. The mailing address of	of the limited liabili	ity company is:		
101-A Business Centre Dr	ive, Destin, Florida 3	32550		
03/14/2005			L05000025410	
3. Date of filing/registration in Florida		- . · · ·	4. Document number	
5. The name of the regist Florida Department of		registered office	address as shown on t	he records of the
•	Herman L. Nee	ese, Jr.		
	· • · · · · · · · · · · · · · · · · · ·	Name		•
	101-A Business			
	Dootin Florido 2	Address		
	Destin, Florida 3	City, State and Z	in	15 SE
4 The name and address		-		L ALIG
6. The name and address	of the new register	red agent and/or	omice:	THE G
	Gary B. Leuchtn	nan	_	29 1AKX ASSI
	501 Commender	Name icia Street		
	Florida street ad	dress (P.O. Box	NOT acceptable)	ORIGINAL STATE
	Pensacola	FL 3250)2	*
	C	ity, State and Zip)	
If the limited liability corconfirmed that after the cand the business office of liability company, it is he of the members of the lip or the operating agreeme	change or changes a f the registered age ereby confirmed that mited liability com- nt of the limited lia	are made, the Floor will be identicated the change(s) pany or as otherwallity company.	rida street address of t al. Or, in the case of a was/were authorized b	he registered office a Florida limited y an affirmative vote
(Signature of a member or autho		member)		
(Printed or typed name of signee		* · - j- ·	. : *	·
I hereby accept the apportant of the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confine (Signature of Registered Agent)	nintment as register nsfof all statutes re id accept the oblig this document is be that the limited li		ree to act in this capac per and complete perfo tion as registered age: ely reflect a change in has been notified in wr	rity. I further agree to rmance of my duties, nt as provided for in the registered office riting of this change.
Divisi	an af Carnaratian	c DO Doy 637	7 Tollahassaa FI 22	1211

FILING FEE: \$25.00