L050000 30817

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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.	1. The name of the limited liability company is: P.L.	M. Developments, LLC
2.	2. The mailing address of the limited liability company	y is : 14500 Beach Blvd.
	Jacksonville, Florida 32250	
N	March 29, 2005	L05000030817
3 .	3. Date of filing/registration in Florida	4. Document number
5.	5. The name of the registered agent and the registered of Florida Department of State: Reto J. Schneider	office address as shown on the records of the
	Nam 371 19th Street	e
Address Atlantic Beach, Florida 32233		
	City, State	and Zip
6.	6. The name and address of the new registered agent ar	ıd/or office:
John C. Parker		
14500 Beach Blvd.		E G
	Florida street address (P.O.	Box NOT acceptable)
	Jacksonville FL	32250
	City, State ar	id Zip
co: and lia the the	If the limited liability company is not organized under a confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)	ne Florida street address of the registered office lentical. Or, in the case of a Florida limited re(s) was/were authorized by an affirmative vote of rwise provided in the articles of organization or
Jo	John G. Crivelli, Esq.	
	(Printed or typed name of signee)	
	I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office cany has been notified in writing of this change,
(Sig	(Signature of Registered Agent)	
	Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314

INHS18(10/99)

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