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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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National Registered Agents, Inc. 11600 College Boulevard Suite 210 Overland Park, KS 66210 800.550.6724 Fax 913.851.0713

February 19, 2008

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE:

Egret's Roost LLC

Change of Registered Office and Registered Agent

Dear Sir/Madam,

For the purposes of changing the registered office and registered agent of the above captioned Egret's Roost LLC please find enclosed, in duplicate, a Statement of Change of Registered Office or Registered Agent accompanied by our check in the amount of Amount of \$25.00.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed envelope.

Thank you in advance for your cooperation in this matter.

Sincerely,

Xonda Diven

National Registered Agents, Inc.

Konda Dira

Enclosure - Check

FROM :

FAX NO. :8634139781

Feb. 13 2008 04:53PM P2

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Egret's Roost 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:

Xonda Diven

(Name of Person)

National Registered Agents, Inc.

(Firm/Company)

11600 College Blvd., Suite 210

(Address)

Overland Park,

KS

66210

(City/State and Zip Code)

For further information concerning this matter, please call:

Xonda Diven-National Registered Agts at (800

ղ 520-6724 ext 521

(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 Filing Fee

■ \$55 Filing Fee & Certified Copy

INHS18 (8/05)

FROM:

FAX NO. :8634139781

Feb. 13 2008 04:53PM P3

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: Egret's Roost LLC 2. The mailing address of the limited liability company is: PO BOX 91971, Lakeland, FL 33804-1971 03/30/2005 L05000031990 4. Document number 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: KUNISH, CRAIG Name 825 VISTABULA ST Address LAKELAND FL 33801 City, State and Zip 6. The name and address of the new registered agent and/or office: NRAI Services, Inc. Name 2731 Executive Park Drive, Suite 4 Florida street address (P.O. Box NOT acceptable) Weston 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 (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.

NRAN Services, Inc.

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