L05000034364

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Durain and Fatiha Nama)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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TALLAHASSEE, FLORITA

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FILING REQUEST

June 30, 2005

FLORIDA SECRETARY OF STATE

Type of Filing:

CHANGE OF AGENT

Subject(s):

LIGHTHOUSE MANAGEMENT SERVICES, LLC

Form(s) Enclosed:

STATEMENT OF CHANGE OF REGISTERED AGENT/OFFICE

Supporting Document(s):

NONE

Check Enclosed:

CHECK #19640 FOR \$25.00

Return Via:

REGULAR MAIL

Filing Method:

ASAP



PLEASE RETURN TO:

PREMIER CORPORATE SERVICES, INC.

590 PARK STREET, SUITE 6

ST. PAUL, MN 55103

Please call me at 1-800-227-1256 if there are any questions.

Thank you!

Jackie Sorman

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 limite	ed liability company is:	Lightnous	se Management S	er vices, LLC
2. The mailing address of	f the limited liability co	mnany is ·	1908 31st Avenu	e West
Bradenton, FL 34205	and indicate madelity od.	inpany is		
				
April 7, 2005		L05000034364		
3. Date of filing/registration in Florida			4. Document num	ber
5. The name of the register Florida Department of	ered agent and the regist State: Gayle Mullikin	tered office	address as shown o	n the records of the
	Gayle Mullikili	Name		
	1908 31st Avenue \			
	Bradenton, FL 342	Address 05		
	City,	State and Zi	p	
6. The name and address	of the new registered ag	gent and/or o	office:	
	NRAI Services, Inc.			SECTION TO
	526 E. Park Avenue	Name		HASS
	Florida street address	(P.O. Box	NOT acceptable)	SECTION OF THE
	Tallahassee	FL 3230	1	70 72
	City, St	tate and Zip		2: 30 FLORIE
If the limited liability come confirmed that after the cleand the business office of liability company, it is here the members of the limite the operating agreement of	nange or changes are mathe registered agent will be the confirmed that the displicitly company or a fifth limited liability company.	ade, the Flor Il be identica change(s) was otherwise ompany.	rida street address o	of the registered office
Signature of a member or authori	zed representative of a member	r)		
Michael B. Pagh, Chie	f Manager/Pres.			
(Printed or typed name of signee)			•	
I hereby accept the appoisonply with the provision and I am familiar with an Chapter 608, F.S. Or, if taddress, I hereby confirm				acity. I further agree to rformance of my duties, gent as provided for in the registered office writing of this change.
(Signature of Registered Agent)	Jackse Sorman, AS	SF.Sec.		
Divisio	n of Corporations, P.C	D. Box 6327	, Tallahassee, FL	32314

FILING FEE: \$25.00

INHS18(10/99)