L050000056111

(F	Requestor's Name)				
<u> </u>	address)				
A)	address)				
(C	City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					
APR - 9 2010					
EXAMINER					

Office Use Only



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04/08/10--01044--023 **50.00

TALLAHASSEE FLORIDA

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	<u> </u>			COMPANY, L	LC	
Dear S	Sir or Madam:					
The e	nclosed Registered Agent/Registered	Office	Change ar	nd fee(s) are subm	itted for filing.	
Please	e return all correspondence concernín	g this m	atter to th	e following:		
	Lora Lee Schaible					
	Name of Person					
GLEE DEVELOPMENT COMPANY, LLC Firm/Company			2010, 54.07 74.17			
	2732 Muirfield Drive				2010 APR -8 SECTE DARY ALLAHASSEE	ī
	Address				£ 2	1
Navarre, FL 32566 City/State and Zip Code			3: 23 STATE ORIDA	C		
E-	leeschaible@bellsouth.ne	et notificatio	n)			
For fu	rther information concerning this ma	tter, plea	ase call:			
	Lee Schaible	at (850)	936-	-5770	
_	Name of Person		Are	a Code & Daytime Tele	phone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registr Divisio P.O. Be	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314	1	
	Enclosed is a check for the follow	ing amo	unt:			
ļ	✓ \$25 Filing Fee		\$55 F	Filing Fee & Certin	fied 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. Name of the limited liability company:	GLEE DEVELOPMENT COMPANY, LLC
2. (a) Principal office address of limited liab	ility company:
(Note: MUST BE STREET ADDRE	SS) 2732 Muirfield Drive Navarre, FL 32566
(b) Mailing address of limited liability cor	
(Note: MAY BE POST OFFICE BO	Navarre, FL 32566
1/1/2010	L0500005611개 원 등
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office	ce shown on the records of the Florida Dept of State:
Registered Agent:	The Company Corporation ∑
Registered Office Address:	2711 Centerville Road Wilmington, DE 19808
(b) Enter name of <u>NEW Registered Agen</u> <u>NEW Registered Agent:</u>	t and/or <u>NEW Registered Office address</u> : <u>Lora Lee Schaible</u>
NEW Registered Office Address:	2732 Muirfield Drive
(MUST BE FLORIDA STREET ADI	Navarre ,FL32566
confirmed that after the change or changes are and the business office of the registered agent liability company, it is bereby confirmed that the	ed under the laws of the State of Florida, it is hereby made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited the change(s) was/were authorized by an affirmative vote by or as otherwise provided in the articles of organization lity company.
Lora Lee Schaible Printed or typed name of signee	
I hereby accept the appointment as registered comply with the provisions of all statutes related and I am familiar with and accept the obligation Chapter 608, F.S. Or, if this document is being address, I hereby confirm that the limited liab	d agent and agree to act in this capacity. I further agree to tive to the proper and complete performance of my duties, ons of my position as registered agent as provided for in a filed to merely reflect a change in the registered office illty company has been notified in writing of this change.
Signature of Registered Agent	

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