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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

| TO: | Registration Section Division of Corporations | | | |
|--------|---|--|--|--|
| CHRI | ECT: Cane Cora | I Parkway Investments, L.L.C | | |
| SUDJ. | SUBJECT: Cape Coral Parkway Investments, L.L.C Name of Limited Liability Company | | | |
| D (| | | | |
| Dear S | Sir or Madam: | | | |
| The er | nclosed Registered Agent/Registered | Office Change and fee(s) are submitted for filing. | | |
| Please | return all correspondence concerning | g this matter to the following: | | |
| | Robert A. Lee Jr. | | | |
| | Name of Person | | | |
| | | | | |
| | Cape Coral Parkway Investment | s, L.L.C | | |
| | Firm/Company | | | |
| | 2686 Middle Country Rd. | | | |
| | Address | | | |
| | Lake Grove, NY 11755 | | | |
| | City/State and Zip Code | | | |
| ——Е- | robertaleejr@aol.com -mail address: (to be used for future annual report | notification) | | |
| For fu | rther information concerning this mat | ter, please call: | | |
| | Robert A. Lee Jr | at (516) 903-6400 | | |
| | Name of Person | Area Code & Daytime Telephone Number | | |
| | STREET/COURIER ADDRESS: | MAILING ADDRESS: | | |
| | Registration Section | Registration Section | | |
| | Division of Corporations | Division of Corporations | | |
| | Clifton Building | P.O. Box 6327 | | |
| | 2661 Executive Center Circle Tallahassee, Florida 32301 | Tallahassee, Florida 32314 | | |
| | Enclosed is a check for the followi | ng amount: | | |
| | \$25 Filing Fee | \$55 Filing Fee & Certified Copy | | |

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTHYFOR 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.

| Name of the limited liability company:Cape Company | oral Parkway Investments, L.L.C |
|---|---|
| 2. (a) Principal office address of limited liability company | <i>y</i> : |
| (Note: MUST BE STREET ADDRESS) | 2696 MIDDLE COUNTRY RD. LAKE GROVE, NY 11755 |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 06/23/2005 | DIGITE MIDDLE CHAPTRY RD. LAKE ROVE, NY 1155 L05000062577 |
| | 4. Document number |
| 5. (a) Registered Agent and Registered Office shown on a | • |
| Registered Agent: | Schutt, Darrin R ESQ |
| Registered Office Address: | 1105 Cape Coral Parkway East, Suite C Cape Coral, FL 33904 |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : | W Registered Office address: Robert A. Lee Jr. |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 1840 N. Tamiami Trail North Fort Myers ,FL 33903 |
| If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member Robert A. Lee Jr. Printed or typed tame of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the province of the obligations of my portugate of the provisions of the company of the confirmation of the limited liability company address, I hereby confirm that the limited liability company | laws of the State of Florida, it bereby lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affifthative vote wise provided in the articles of a Florida limited. |
| Signature of Registered Agent | |

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