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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. The name of the limited liab	ility company is: _	Diamond Creek Devel	opment, LLC				
2. The mailing address of the li	mited liability con	pany is: P.O. Box 163	373				
Tallahassee, FL 32317							
June 28, 2005		L05000063	3725				
3. Date of filing/registration in Florida		4. Document	4. Document number				
5. The name of the registered ag Florida Department of State:		ered office address as sho	wn on the records of the				
_1011	y L. McDowell						
641	0 Garfield Rd	Name	gen (
		ddress					
ET !	Meade, FL 33841						
<u>_' ' ' '</u>		tate and Zip	ا المنظور الأمنيا المنظور المن المنظور المنظور المنظو				
6. The name and address of the	new registered age	ent and/or office:					
Ton	y L. McDowell						
330	N 5 Wildwood Trail	ame	— 5 To				
Flor	ida street address	(P.O. Box NOT acceptab	le)				
Talla	ahassee,	FL 32312					
	City, Sta	ate and Zip					
If the limited liability company confirmed that after the change and the business office of the reliability company, it is hereby can be members of the limited liability company agreement of the limited liability.	or changes are magistered agent will	de, the Florida street adda	ress of the registered office				
Signature of a member or authorized rep	resentative of a member)						
Town Mc Nowe !							
(Printed or typed name of signee)		,					
I hereby accept the appointment comply with the provisions of a cand I am familiar with and acceptanter 608, F.S. Or, if this do address, I hereby confirm that the confirm that the confirm of the confirm that the confirmation of the confirmation that the confirmation is the confirmation of the confirmation that the confirmation is the confirmation of the confirmation that the confirmation is the confirmation of the confirmation in the confirmation is the confirmation of the confirmation in the confirmation is the confirmation of the confirmation in the confirmation is the confirmation of the confirmation in the confirmation is the confirmation of the confirmation in the confirmation of the confirmation is the confirmation of the confirmation of the confirmation is the confirmation of the con	nt as registered age ill statutes relative opt the obligations cument is being fi he limited liability	ent and agree to act in thi to the proper and comple of my position as registe led to merely reflect a che company has been notifi	is capacity. I further agree to te performance of my duties, red agent as provided for in ange in the registered office ed in writing of this change.				
(Signature of Registered Agent)							

FILING FEE: \$25.00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314