## L05000067565

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Duninger Entity Name)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
A. LUNT		
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JUN 03 2008		
EXAMINER		
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Office Use Only

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Aslan Beach House, LLC	
SCHJECT.	Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Christina Combs	
(Name of Person)	
(14thile of Forson)	ALI ALI
	TIC NAY 30 SECRETARY ALLAHASSE
Aslan Development	ASP
(Firm/Company)	MAY 30 F
1031 Zorn Avenue, Suite 1400	
(Address)	P I: 57
	<b></b>
Louisville, KY 40207	
(City/State and Zip Code)	<del></del>
For further information concerning this mat	ter, please call:
Christina Combs	at (502)253-3100 x 142
(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 followi	ing amount:
	□ \$55 Filing Fee & Certified 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: Aslan Beach Ho	use, LLC
2. (a) Principal office address of limited liability company:	1031 Zorn Avenue, Suite 1400
(Note: MUST BE STREET ADDRESS)	Louisville, KY 40207
(b) Mailing address of limited fiability company:	Same as above
(Note: MAY BE POST OFFICE BOX)	
07/08/05	L05000067565
3. Date of filing/registration in Florida	. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Farm Degl. of State:
Registered Agent:	Stoneburner Berry 3 mmons, P.A.
Registered Office Address:	841 Prudential Drive Suite 1400  Jacksonville, FL 32267
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office Address:
NEW Registered Agent:	Gary L. Wilkinson, Esq.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1301 Riverplace Boulevard, Suite 1818  Jacksonville  FL 32207
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability 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.	aws of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote
(Signature of a member or authorized representative of a member)	
Gregory G. Evans, Manager (Printed or typed name of signee)	-
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provisions of all statutes relative to the province of and I amfamiliar with and accept the obligations of my post Chapter 600, F.S. Or, if this document is being filed to met address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
(Signature of Registered Agent)  Division of Cornerations, P.O. Box 63	27. Tallahassee, FL 32314

FILING FEE: \$25.00

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