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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

K.SALY EXAMINER NOV -8 2012

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Development L. Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Douglas A. Dodson Name of Person
D+T Development LLC Firm/Company
11 Catalpa Ct
Ft Myers FL 33919 City/State and Zip Code
doug dod son Ocomcast. net E-mail address: (tobe used for future annual report notification)
For further information concerning this matter, please call:
Douglas A Dodsonat (239) 936-1482 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 following amount:
\$25 Filing Fee \$\to\$ \$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 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	
1. Name of the limited liability company:	Development Exclaration
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	11 Catalpa CA 3
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Fort myers, FL 33919
8/8/2005	L05000078261
3. Date of filing/registration in Florida 4	. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	Terrence Hiduke
Registered Office Address:	16119 Mount Abbey W # 202 Ft myers, FL 3390B
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	Douglas A Dodson
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	11 Catalpa Ct
(MOST BE PLOXIDA STREET ADDRESS)	Ft myers, FL 33919
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of member or authorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of
Doualas A. Dodson	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	ree 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 Companytions D.O. Don 622	7 Tallahagaa El 20214

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