

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000016346 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Ta :

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : AKERMAN SENTERFITT - TAMPA

Account Number : 120000000249
Phone : (813)223-7333
Fax Number : (813)223-2837

REGISTERED AGENT CHANGE

IDEAL DALLAS HOLDINGS, LLC

RECEIVED

OF JAN 19 AM 8: 00

INISIGN OF CORPORATIONS

Certificate of Status	D
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H06000016346 3)))

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT UK BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is: Ideal Dallas Holdings, LLC 2. The mailing address of the limited liability company is: P.O. Box 560, Crystal Beach, FL 34681.
2. The mailing address of the limited liability company is : P.O. Box 560, Crystal Beach, FL 34681
B/15/2005 L05000079691
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Harry P. Teichman
Name 100 S. Ashley Drive, Suite 1500
Address
Tampa, FL 33602
City, State and Zip
Harry P. Teichman Name 100 S. Ashley Drive, Suite 1500 Address Tampa, FL 33602 City, State and Zip 6. The name and address of the new registered agent and/or office: American Information Services Inc. Name
American Information Services Inc.
401 E. Jackson Street, Suite 1700
Florida street address (P.O. Box NOT acceptable)
Tampa, FL 33602
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florids, it is hereby confirmed that after the change or changes are made, the Florids street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the months of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member)
Jili Weber
(Printed or typed name of signee)
I haraby accept the appointment as registered agent and agree to got in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my dutes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Lapler 608, F.S. Or, it this document is being filled to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
(Signature of Registered Aguat) Division of Cornerations, P.O. Box 6327 Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (8/05)