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ACCOUNT NO. : 072100000032 7480527 REFERENCE : 630715 AUTHORIZATION (COST LIMIT ORDER DATE: November 30, 2006 ORDER TIME : 2:22 PM ORDER NO. : 630715-005 CUSTOMER NO: 7480527 CHANGE OF AGENT NAME: TOBIN CREEK, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER:

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.

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1. The name of the limited li	ability company is: Tobin Creek, LLC	
2. The mailing address of the	e limited liability company is : 8101 E. Prentice Ave., Ste. 400,	
Greenwood Village, CO 80111		
August 17, 2005	L05000081440	
3. Date of filing/registration	in Florida 4. Document number	
5. The name of the registered Florida Department of Stat	agent and the registered office address as shown on the records of the	
Na	ace Cohen	
	Name	
28	7 Burnt Pine Dr.	
	Address	
Na	iples, FL 34119	
	City, State and Zip	
Name 287 Burnt Pine Dr. Address Naples, FL 34119 City, State and Zip 6. The name and address of the new registered agent and/or office: Corporation Service Company Name		
Co	rporation Service Company	
	Name	
120	01 Hays St.	
Fi	orida street address (P.O. Box NOT acceptable)	
<u>Tal</u>	lahassee, FL 32301 FL	
	City, State and Zip	
confirmed that after the chang and the business office of the liability company, it is hereby of the members of the limited	by is not organized under the laws of the State of Florida, it is hereby the or changes are made, the Florida street address of the registered office registered agent will be identical. Or, in the case of a Florida limited of confirmed that the change(s) was/were authorized by an affirmative vote alliability company or as otherwise provided in the articles of organization the limited liability company.	
Michael Eloranto		
(Printed or typed name of signee)		
I hereby accept the appointm comply with the provisions of and I am familiar with and ac Chapter 608, F.S. Or, if this address, I hereby confirm that	ent as registered agent and agree to act in this capacity. I further agree to all statutes relative to the proper and complete performance of my duties, cept the obligations of my position as registered agent as provided for in document is being filed to merely reflect a change in the registered office t the limited liability company has been notified in writing of this change.	
(Signature of Registered Agent)	Secretary	

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