## L05000083993

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DICTOR STATE

05 OCT 20 PH 2:59

ATTORNEYS' TITLE 1965 Capital Circle NE, Suite A Tallahassee, FI 32308 850-222-2785 City/St/Zip - OSOL PO PA C. SS CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1- LAVENDER HILL HOLDINGS, L.L.C. X Walk-in Pick-up time ASAP Certified Copy Mail-out Will wait Photocopy Certificate of Status **NEW FILINGS** AMENDMENTS Profit Amendment Non-Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark XXX Other

Examiner's Initials

## COVER LETTER

	stration Section ion of Corporations	
SUBJECT:	Lavender Hill Holdings, L.L.(Name of Limited	C. I Liability Company)
Dear Sir or M	ladam:	
The enclosed	Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return	all correspondence concerning this m	atter to the following:
Timothy (	G. Hains, Esq. (Name of Person)	CKING STATE
Quarles &	& Brady, LLP (Firm/Company)	<del></del>
1395 Pan	ther Lane, Suite 300	
	(Address)	
Naples, Fl	Orida 34109 (City/State and Zip Code)	
For further in	nformation concerning this matter, ple	ase call:
Timothy G	6. Hains, Esq. at (2) (Name of Person)	(Area Code & Daytime Telephone Number)
Regis Divisi Clifto <b>26</b> 61	tration Section ion of Corporations n Building Executive Center Circle nassee, Florida 32301	MAILING ADDRESS:  Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Encl	osed is a check for the following amo	ount:
<b>☑</b> \$2	5 Filing Fee	S55 Filing Fee & Certified Copy

INHS18 (8/05)

## 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 liability company i	is: Lavender	Hill Holdings, L.L.C	<u> </u>
2. The mailing add	ress of the limited liability	company is:	4796 Crayton Co	ourt, Naples, FL 34103
<del></del>	<del></del>	<del>-</del>		· · · · · · · · · · · · · · · · · · ·
August 24, 2005		<u>ب جو</u> د	L05000083993	
3. Date of filing/re	gistration in Florida		4. Document nur	nber
5. The name of the Florida Department	registered agent and the regent of State:	gistered office	address as shown	
4	Alexander And	lerson	* a rnu	•
	<del></del>	Name	<del></del>	
	282 Sawgrass C	Court		安 5 1
		Address		E 5 5 -
	Naples, Florida	34110 ty, State and Z		報る
		• ,	•	10.2%
6. The name and ad	dress of the new registered	agent and/or	office:	Fig. 5 U
	Alexander Ande	erson		FILED PH 2:59
		Name		
	4796 Crayton Co	ourt	<del></del>	<del>y</del>
	Florida street addre	ess (P.O. Box	NOT acceptable)	
	Naples,	FL 341	03	
	City,	, State and Zip		<del></del>
confirmed that after and the business off liability company, in of the members of or the operating agr	ty company is not organize the change or changes are fice of the registered agent it is hereby confirmed that it the limited liability comparement of the limited liabil	made, the Flowill be identically be identically be change(s) may or as otherwhite company.	orida street address cal. Or, in the case was/were authorize	of the registered office of a Florida limited d by an affirmative vote
Almana al a a Arada a				
(Printed or typed name of	son, Managing Member	<u>r</u>		
	appointment as registered visions of all statutes relatith and accept the obligation of this document is being a firm that the limited liabith and accept the world with the limited liabith.	agent and ag ive to the prof ons of my posi g filed to mere dity company	ree to act in this ca ser and complete p tion as registered c ely reflect a change has been notified in	pacity. I further agree to erformance of my duties, agent as provided for in in the registered office a writing of this change.
<b>T</b>	and the second of the second	D O D (00)		2024 (

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