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(Requestor's Name)					
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PICK-UP	WAIT	MAIL			
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Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				
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Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations			₽
SUBJECT: Lake Francisco Plaza, LLC (Name of		bility Company)	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered (	Office Chan	ge and fee(s) are submitted	for filing.
Please return all correspondence concerning	this matter	to the following:	
Mr. Richard F. Martin			
(Name of Person)			
(Aladio of Followity			-i
Laka Eransinas Plans III O	,		TALLAHASSI
Lake Francisco Plaza, LLC (Firm/Company)		<del></del>	至
(Time Company)			ASF
19620 Tidos Dood			SHOW IT
18630 Tyler Road			E AH II: OL
(Address)			
Odessa, Florida 33556			•
(City/State and Zip Code)			
For further information concerning this matt	ter, please c	all:	. •
Mrs. Deborah Martin	at ( 813	) 926-3836	
(Name of Person)		(Area Code & Daytime T	'elephone 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	ng amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY GOMPANY

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 limit	ted liability company is: L	ake Francisco Plaza, LLC			
2. The mailing address	of the limited liability com	pany is : P.O. Box 940, Odess	a, Florida 33556		
02/15/07	.,	L05000094192			
3. Date of filing/registration in Florida		4. Document num	4. Document number		
5. The name of the regis Florida Department of	tered agent and the register f State:	red office address as shown or	n the records of the		
•	Temple H. Drummon	d, Attorney at Law			
	328 West Bearss Aven	Name ue	ZOOT MAR 26 SECRETAR) TALLAHASS		
Address		ddress	富 哥 司		
	Tampa, Florida 33613	ate and Zip	TAF		
6. The name and address	of the new registered age	-	Ho H		
	Mr. Richard F. Martin		FLORIDI		
	Na 18630 Tyler Road	me	10 July 17		
	Florida street address (	P.O. Box NOT acceptable)			
	Odessa, Florida 33556	FL			
	City, Star	te and Zip			
confirmed that after the and the business office of liability company, it is hof the members of the li or the operating agreement the confirmed that the confirmed that after the confirmed that aft	change or changes are mad of the registered agent will ereby confirmed that the c	der the laws of the State of Fl le, the Florida street address o be identical. Or, in the case o hange(s) was/were authorized as otherwise provided in the company.	f the registered office f a Florida limited by an affirmative vote		
Deborah Martin, Authoriz (Printed or typed name of signed					
	,	nt and agree to act in this cap o the proper and complete per of my position as registered as ed to merely reflect a change i company has been notified in	acity. I further agree to formance of my duties, sent as provided for in the registered office writing of this change.		

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