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TO:	Registration Section
	Division of Corporations

SUBJECT: SW Florida, LLC		
(Name	e 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 concernin	g this matter to the following:	
Carla Kinsey		
(Name of Person)		
American Realty Development		
(Firm/Company)		
615 Crescent Executive Court Suite 120		
(Address)		
Lake Mary, Florida 32746		
(City/State and Zip Code)		
For further information concerning this ma	atter, please call:	
Katie Breslow	at (407) 333-1440 x 18	
(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 follow	ring amount:	
✓ \$25 Filing Fee	\$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 608.508, 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. Name of the limited liability company: SW Florida,	LLC
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	615 Crescent Executive Court Suite 120 Lake Mary, Florida 32746
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	615 Crescent Executive Court Suite 120 Lake Mary, Florida 32746
October 17, 2005	<u>L05000102916</u> <u> </u>
3. Date of filing/registration in Florida	1. Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:
Registered Agent:	Saint-Laurent Properties
Registered Office Address:	1790 Legion Drive Winter Park 7L 32789
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	V Registered Office address: Patrick E. Law
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Magnolia Florida, LLC 615 Crescent Executive Court Suite 120 Lake Mary □,FL 32746
If the limited liability company is not organized under the lattat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	address of the registered office and the business see of a Florida limited liability company, it is an affirmative vote of the members of the limited
Todd L. Borck (Printed or typed name of signee) I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.
(Signature of Registered Agent)	•

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