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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

D. BRUCE

NOV 2 2 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			,	
CUBICCE.	Five Ash Fo	oraet II.C		
	of Limited Liab		137	
Name o	n Emmed Liai	onity Compan		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered	d Office Chan	ge and fee(s)	are submitted	for filing.
Please return all correspondence concerning	ng this matter	to the followi	ng:	
Guy W. Norris				
Name of Person				
Norris & Norris, P.A.				Ag =
Firm/Company				5 3
			•	HA N
253 NW Main Blvd.				SSI SSI
Address	,			PH 1: 45 Y OF STATE EE. FLORIE
				75
	•			유로
Lake City, FL 32055				<u> </u>
City/State and Zip Code				***
gnorris@norrisattornevs.c	com			
gnorris@norrisattorneys.c E-mail address: (to be used for future annual repo	rt notification)	•		
For further information concerning this ma	atter, please ca	all:		
Guy W. Norris	at (386	3 \	752-724	ın
Name of Person	at (<u>386</u>		Daytime Telephon	
CERCET/COLIDIED ADDRECG			DDECC.	
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section		
Division of Corporations		ivision of Cor		
Clifton Building		O. Box 6327	,	
2661 Executive Center Circle	_	allahassee, Flo	rida 32314	
Tallahassee, Florida 32301		•		
Enclosed is a check for the follow	ving amount:	. Wr		
\$25 Filing Fee		\$55 Filing Fe	e & Certified	Сору

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:	Five Ash Forest, LLC			
2. (a) Principal office address of limited liability company:	118 NW Turnberry Drive			
(Note: MUST BE STREET ADDRESS)	Lake City, FL 32055			
(b) Mailing address of limited liability company:	337 SW Tompkins Street			
(Note: MAY BE POST OFFICE BOX)	Lake City, FL 32024			
11/08/2005	L05000108432			
3. Date of filing/registration in Florida 4	. Document number			
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:			
Registered Agent:	Guy W, Norris			
Registered Office Address:	253 NW Main Blvd.			
	Lake City, FL 32055			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	V Registered Office address			
NEW Registered Agent:	Patti H. Goodson			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	337 SW Tompkins Street			
	Lake City ,FL32024			
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of a member or authorized representative of a member ATTI GOODSON Printed or typed name of signce I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the provision of and I am familiar with and accept the obligations of my post Chapter 1008, F.S. Or, fifthis document is being filed to mer address I hereby confirm that the limited liability company	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization			

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