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SECRETARY OF STATE

COVER LETTER

Division of Corporations

SUBJECT: Green, LLC

Name 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 concerning this matter to the following:

William A. Donovan, Esq.

Name of Person

William A. Donovan, P.A.

Firm/Company

267.1 Airport Rd: So., Ste. 304

Naples, FL 34112

Registration Section

TO:

City/State and Zip Code

Patricia.Granados@arentfox.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William A. Donovan

...239

860-5655

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 following 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: GREEN, LLC		<u> </u>
2. (a) Principal office address of limited liability company: 4790 ASTON GARDENS WAY (Note: MUST BE STREET ADDRESS) APT 104		
		
(Note: MOST BE STREET ADDRESS)	NAPLES, FL 34109	<u> </u>
		- ∑
(b) Mailing address of limited liability company:	4790 ASTON GARDENS WAY	Fig. P
(Note: MAY BE POST OFFICE BOX)	APT 104	
(Mole: MAT BET OST OFFICE BOX)	NAPLES, FL 34109	
	144 660, 16 04 703	
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11/30/2005	L05000114535	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown or		pt. of State;
Registered Agent:	NRAI SERVICES, INC.	
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD	
-	PLANTATION, FL 33324	
NEW Registered Agent:	WILLIAM A. DONOVAN, P.A.	
NEW Registered Office Address:	2671 AIRPORT RD SO	
(MUST BE FLORIDA STREET ADDRESS)	STE 304	
	NAPLES	FL 34112
If the limited liability company is not organized under the confirmed that after the change or changes are made, the I and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherw the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the repartical. Or, in the case of a Flores) was/were authorized by an a	gistered office rida limited offirmative vote of
WILLIAM A. DONOVAN, ATTORNEY FOR WALTER T. DONOVAN, MGR Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my per Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	agree to act in this capacity. It roper and complete performan osition as registered agent as erely reflect a change in the re ty has been notified in writing	further agree to ice of my duties, provided for in egistered office of this change.
Signature of Registered Agent		

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