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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: McCauley Apartments, LLC Name of Limited L	iability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	er to the following:
Ralph M. Stair, Jr. Lila B. S.	tair
McCauley Apartments, LLC	
Firm/Company	
2821 West Hawthorne Road	
Address	
Tampa, Florida 33611 City/State and Zip Code	
ralphstair@yahoo.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please	call:
Ralph M. Stair, Jr. Lila B. Stairai (81	3) 374-5717
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amour	nt:
X \$25 Filing Fee	7 \$55 Filing Fee & Certified Conv

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: McCauley A	partments, LLC
2. (a) Principal office address of limited liability company:	2821 West Hawthorne Road
(Note: MUST BE STREET ADDRESS)	Tampa, Florida 33611
(b) Mailing address of limited liability company:	2821 West Hawthorne Road
(Note: MAY BE POST OFFICE BOX)	Tampa, Florida 336 1
12/23/2005	L05000122129 EEO P
3. Date of filing/registration in Florida 4	Document number
5. (a) Registered Agent and Registered Office shown on the	=
Registered Agent:	John E. Brenneis
Registered Office Address:	227 South Calhoun Street Tallahassee, Florida 32301
NEW Registered Agent:	M. Julian Proctor, Jr.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	123 South Calhoun Street
	Tallahassee ,FL 32301
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 identic liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherw or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	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
Printed or typed name of signee	
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the provisions of all statutes relative to the provision and I am familiar with and accept the obligations of my positions of the computer 508, F.S. Or, if this document is being filed to mere address, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ly reflect a change in the registered office has been notified in writing of this change.

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

Signature of Registered Agent