



FILED
Apr 28, 2006 8:00 am
Secretary of State

DOCUMENT # L05000122443				Secretary of State 04-28-2006 90034 003 ****50.00																									
1. Entity Name GIVSP 1245 HOLDINGS LLC																													
Principal Place of Business 6090 CENTRAL AVENUE ST. PETERSBURG, FL 33707		Mailing Address 6090 CENTRAL AVENUE ST. PETERSBURG, FL 33707																											
2. Principal Place of Business		3. Mailing Address																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01232006 Chg-LLC CR2E083 (11/05)																									
City & State		City & State		4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																									
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required																									
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent																									
CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410				Name <u>William Edwards</u> Street Address (P.O. Box Numbers Not Acceptable) <u>6090 Central Avenue</u> City <u>St. Petersburg</u> <u>FL</u> Zip Code <u>33707</u>																									
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.																													
SIGNATURE <u>[Signature]</u>		DATE <u>4-25-06</u>																											
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State																											
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES																									
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.																													
SIGNATURE: <u>[Signature]</u>		DATE <u>4-25-06</u> Daytime Phone # <u>727347-1930</u>																											