L06000002020

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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EXAMINER

SEGRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

TO:	Registration Section Division of Corporations	The state of the s	
SUBJECT: Key West Harbour Development, LLC Name of Limited Liability Company			
Dear S	Sir or Madam:		
The er	nclosed Registered Agent/Registered O	Office Change and fee(s) are submitted for filing.	
Please	return all correspondence concerning	this matter to the following:	
	James Larry Nichols, Esquir	re	
	James Larry Nichols, P.A. Firm/Company	·	
	8191 College Parkway, #205 Address	5	
	Fort Myers, FL 33919 City/State and Zip Code	· 	
E-	jonf@marinaclubsfl.com	otification)	
For fu	rther information concerning this matte	er, please call:	
	James Larry Nichols Name of Person	at (239) 433-1305 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	
٠	Enclosed is a check for the following	ng 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: Key W	Vest Harbour Development, LLC
2. (a) Principal office address of limited liability compan	y: 1500 Colonial Boulevard, #103
(Note: MUST BE STREET ADDRESS)	Fort Myers, FL 33907
(b) Mailing address of limited liability company:	1500 Colonial Boulevard, #103
(Note: MAY BE POST OFFICE BOX)	Fort Myers, FL 33907
1/4/06	L0600002020
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	CFRA. LLC
Registered Office Address:	4221 West Boy Scout Boulevard, #9000 Tampa, FL 33607
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent: <u>NEW Registered Office Address:</u>	W Registered Office address: James Larry Nichols, Esquire 8191 College Parkway, #205
(MUST BE FLORIDA STREET ADDRESS)	Fort Myers ,FL 33919
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member	laws of the State of Florida, it is hereby Florida street address of the registered office tical. Or, in the case of a Florida limited by was/were authorized by an affirmative vote
Jon Finstrom Printed or typed name of/signee	_
	nargo to get in this cangeity. I further acres to
I hereby accept the appointment as registered agent and a comply with the provisions of all statules relative to the pr and I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to ma address, I hereby confirm that the limited liability.compan	igree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in crely reflect a change in the registered office by 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