## Florida Department of State

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## LLC REGISTERED AGENT CHANGE 1115 BLUE HILL CREEK DRIVE, LLC

Certificate of Status	0
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**EXAMINER** 

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P.02/02

## 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 affice or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: 1115 BLUE WII	L CREEK DRIVE, LLC		
2. (a) Principal office address of limited liability compan	y: 122 East Prospect Aven	iue, ZS	2011
(Note: MUST BE STREET ADDRESS)	Lake Bluff, Illinois 60044	AHA.	]Z.=  Z.= 
(b) Mailing address of limited liability company:	122 East Prospect Avenue,	) RY	2
(Note: MAY BE POST OFFICE BOX)	Lake Bluff, Illinois 60044	5 <u>5</u>	K
4/25/2006	L06000042903		35
3. Date of filing/registration in Florida	4. Document number	•	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dep	t, of State	):
Registered Agent:	NRAI SERVICES, INC.		
Registered Office Address:	2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON FL 33331		
	**************************************	***	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent:	Business Filings Incorporated		
<u>NEW</u> Registered Office Address: MUST BE FLORIDA STREET ADDRESS)	1203 Governors Square Blvd, S	uite 101,	
	Tallahessco	_FL3230	1-2960
If the limited liability company is not organized under the confirmed that after the change or changes are made, the kand the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Therefore The agreement of the limited liability company or as other operating agreement of the limited liability company.	lorida street address of the reg tical. Or, in the case of a Flori ) was/were authorized by an ai rwise provided in the articles o	istered of da limites	fice d
Mary E. Schewitz, Manager 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 provisions of all statutes relative to the provision of an familiar with and accept the obligations of my perchapter 608, F.S. Or, if this accumant is being filed to me address, I hereby confirm that the limited liability company	ngres to act in this capacity. I oper and complete performant stition as registered agent as p trely reflect a change in the re y has been notified in writing t	further as se of my d rovided f zistered o of this chi	eree to Julies, or in office inge.
Signature of Registered Agent Mark Williams, AVP Business Filings Incorporated  Division of Corporations, P.O. Box 63  PILING FER: 5		•	

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