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(((H11000277165 3)))



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LLC REGISTERED AGENT CHANGE

ALICO 4, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

J. SAULSBERRY

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: ALICO 4, LLC					
2. (a) Principal office address of limited liability compan	y: 17251 ALICO CENTER	ROAD, #4			
(Note: MUST BE STREET ADDRESS)	FORT MYERS PL 33967				
(b) Mailing address of limited liability company:	17251 ALICO CENTER	ROAD, #4			
(Note: MAY BE POST OFFICE BOX)	FORT MYERS FL 33967				
05/12/2006	L06000049634				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown on	Registered Agent and Registered Office shown on the records of the Florida Dept. of State.				
Registered Agent:	NAPLES-LAWDOCK, INC.				
Registered Office Address:	1395 PANTHER LANE, SUITE 3 NAPLES FL 34109	300			
	WALLES PL 34103				
NEW Registered Agent. NEW Registered Office Address:	C T Corporation System 1200 South Pine Island Road				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road				
	Plantation	_,F <u>1</u> ,_33324			
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be identiability company, it is hereby confirmed that the change(sof the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the reg itical. Or, in the case of a Flori s) was/were authorized by an a rwise provided in the articles of	gistered office ida limited ffirmative vote			
Signature of a member or authorized representative of a member	_	SE SE			
Ron Hatcher		CRE			
Printed or typed name of signes	arrange on the thin appeals. I	E. L. S. Paras			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the property and I am familiar with and accept the obligations of my proceedings of the configuration of the provision of the complete to the configuration of the limited liability compared to T Corporation System	agree to act in this capacity. I objet and complete performan osition as registered agent as erely reflect a change in the re ty has been notified in writing	turing agreem to of my duties or provided for in gistered affices of this thinges			
Signature of Registered Agent Relience Ban	the contract of the contract o				
Division of Cornerations P.O. Bar 6	327 Tallahassee, Fl. 3231d	₩ 5			

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

By: