L0600005/242

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SECRETARY OF STATE
TALLAHASSEE, FI CRETE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: G & A Development	
(Name of Limited Liability Con	npany)
The enclosed member, managing member or manager resig filing.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Guy R Derby	
(Contact Person)	-
G & A Development LLC	
(Firm/Company)	2001 SEC
4756-58 Leonard Blvd.	2007 SEP - U SECRE TAKY NLLAHASSE
(Address)	
Lehigh Acres, FL 33971	TS T
(City/State and Zip Code)	FATE ORID
For further information concerning this matter, please call:	
Guy Derby at (239	303-3580
(Name of Contact Person) (Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I \$25 Filing Fee \$35	Department of State for: \$55 Filing Fee & Certified Copy
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

CR2E079 (5/06)

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. The name of the limite	ed liability company is:	G & A Development LLC
2. The mailing address o	f the limited liability comp	any is: 6750 North dr Fort Myers, FL 33905-8673
May 18, 2006		L06000051242
3. Date of filing/registrat	tion in Florida	4. Document number
5. The name of the regist Florida Department of	ered agent and the registere State:	ed office address as shown on the records of the
	Arthur L	
		ame
	6750 No	
		dress
	Fort Myers, I	tte and Zip
	• •	
6. The name and address	of the new registered agen	t and/or office:
•	Guy R D	
	Nan	
	4756-58 Led	onard Blvd.
	Florida street address (P	O. Box NOT acceptable)
	Lehigh Acres, F	L 33971
	City, State	and Zip
confirmed that after the cand the business office of lability company, it is he of the members of the life or the operating agreement.	hange or changes are made f the registered agent will be reby confirmed that the change pited liability company or pit of the limited liability con the representative of a member)	ler the laws of the State of Florida, it is hereby e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vot as otherwise provided in the articles of organizatio ompany.
(Printed or typed name of signee	Acthur Lauce	
I hereby accept the apportunity with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm	intment as registered agen ns of all statutes relative to nd accept the obligations of this document is being filed that the limited liability co	t and agree to act in this capacity. I further agree the proper and complete performance of my dutie my position as registered agent as provided for it to merely reflect a change in the registered office ompany has been notified in writing of this change

FILING FEE: \$25.00

INHS18 (8/05)