

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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LMIDCAP@SHUTTS.COM

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LLC REGISTERED AGENT CHANGE SATURN OF GULF COAST, LLC

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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: SATUI	RN OF	GULF COAST, LLC			
2.(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		2533 East 15th Street Panama City, FL 32			
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		P O Box 700667 St. Cloud, FL 34770)		<u> </u>
	07/17/2006		L06000071208			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)						
	Registered Agent:		John B. Ritch	SECH ALLIE	10 NOV	· ·
	Registered Office Address:		100 Church Street Kissimmee, FL 3474	41 SS	9 V 19	1
6. (b)	Enter name of NEW Registered Agent and/or NEW Re	gistere		m _o	至	J
NEW	Registered Agent:		Corporation Compan	is of Biggin	برة ض	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)			300 S. Orange Ave.	Ā		
			Suite 1000 (JGH)			
			Orlando	, FL _	3280)1
change will be authoriz organica	mited liability company is not organized under the laws of the or changes are made, the Florida street address of the register identical. Or, in the case of a Florida limited liability compared by an affirmative vote of the members of the limited liability company of the operating agreement of the limited liability company of a member or authorized representative of a member)	ed office my, it is ity com	e and the business office hereby confirmed that i	of the reg	istered (s) was	agent /were
	an C. Starling					
(Printed o	r typed name of signee)					
provisio obligatio to reflect writing	o accept the appointment as registered agent and agree to accept the appointment as registered agent and complete performa ons of my position as registered agent as provided for in Chapet a change in the registered office address, I hereby confirm of this change. Orderation company of Orlando J. Oregory Humphries, Vice President	nce of n ter 608,	ny duties, and I am famil F. S. Or, if this docume	liar with an int is being	id acce _i filed m	pt the nerely

Division Of Corporations, P.O. Box 6327, Tallahassee, Fl 32314

FILING FEE: \$25.00