

L260000089808

STEPHEN F. BAKER

ATTORNEY AT LAW

800 FIRST STREET SOUTH
WINTER HAVEN, FLORIDA 33880-3666

(Address)

(City/State/Zip/Phone #)

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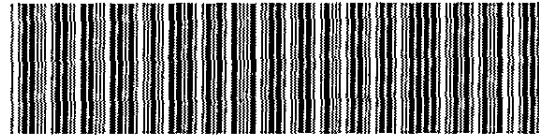
(Business Entity Name)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 31, 2007

STEPHEN F BAKER, ATTORNEY
800 FIRST ST SOUTH
WINTER HAVEN, FL 33880-3666

SUBJECT: TAP OF POLK COUNTY, LLC
Ref. Number: W07000043134

RECEIVED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for TAP OF POLK COUNTY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A post office box is not an acceptable address for the registered agent.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Document Specialist
Registration/Qualification Section

Letter Number: 407A00052388

**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 limited liability company is: TAP OF POLK COUNTY, LLC
2. The mailing address of the limited liability company is : P O Box 549, Eagle Lake, FL 33839

September 11, 2006 L06000089808

3. Date of filing/registration in Florida 4. Document number


5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Michael Strang
Name
1015 N 12th Street
Address
Winter Haven, FL 33839
City, State and Zip

6. The name and address of the new registered agent and/or office:


Richard J. Conti
Name
1300 Third Street SW
Florida street address (P.O. Box NOT acceptable)
Winter Haven FL 33880
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 ✓
(Signature of a member or authorized representative of a member)

Richard J. Conti
(Printed or typed name of signer)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

 ✓
(Signature of Registered Agent)

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

FILED
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