## 106000098348

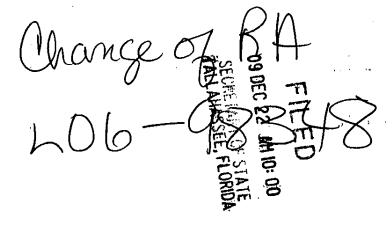
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EXAMINER

## \* ATATEMENT 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:	Lightsey Road, L.L.C.		
2. (a) Principal office address of limited liability company	···		
(Note: MUST BE STREET ADDRESS)	300 East State Street 202 3 Jacksonville, Florida 32202 5		
(b) Mailing address of limited liability company:	22 7		
(Note: MAY BE POST OFFICE BOX)	Same mg = O		
10/06/2006	L06000098348		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the	the records of the Florida Dept. of State:		
Registered Agent:	John S. Duss, IV. Esq.		
Registered Office Address:	Ford, Bowlus, Duss, Morgan, Kenney, S 10110 San Jose Boulevard Jacksonville, Florida 32257		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			
NEW Registered Agent:	John S. Duss, IV		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Duss, Kenney, Safer, Hampton & Joos 4348 Southpoint Boulevard, Suite 101 Jacksonville ,FL32216		
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be ident liability 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  Signature of a member or authorized representative of a member  John S. Duss, IV, Authorized Person  Printed or typed name of signee	aws of the State of Florida, it is hereby lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provided and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to me address, thereby confirm that the similed liability company	gree to act in this capacity. I further agree to sper and complete performance of my duties, sition as registered agent as provided office v has been notified in writing of this change.		

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

INHS18 (05/08)