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(Cit	ty/State/Zip/Phone	: #)			
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SECRETARY OF STATE

## COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: RIVERSIDE DEVELOPMENT COMPANY, LLC (Name of Limited Liability Company)						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.					
Please return all correspondence concerning t	his matter to the following:					
James D. Cecil (Name of Person)	·					
Pishon Partners, LLC (Firm/Company)						
505 S. Flagler Drive, Suite 1002						
(Address)						
West Palm Beach, FL 33401						
(City/State and Zip Code)						
For further information concerning this matte	er, please call:					
James D. Cecil	at (561 ) 655-4441					
(Name of Person)	(Area Code & Daytime Telephone Number)					
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					
Enclosed is a check for the following amount:						
\$25 Filing Fee	\$55 Filing Fee & Certified Copy					

INHS18 (8/05)

## 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.

O .	J			
1. The name of the limite	d liability company i	is: Riverside Develop	pment Company, LLC	
2. The mailing address o	f the limited liability	company is: 505	S. Flagler Drive, Suite	1002
West Palm Beach, FL 334				
		6000115005		
3. Date of filing/registrat	ion in Florida	4.	Document number	
5. The name of the register Florida Department of	ered agent and the rep State:	gistered office add	ress as shown on the	records of the
-	Corporate Creation	ons Network, Inc		
		Name		
	11380 Prosperity F	arms Road #221E	<u> </u>	
		Address		<b>o</b> DIV
	Palm Beach Garde			107 1586 1586
	Cit	y, State and Zip		马鼍
6. The name and address	of the new registered	agent and/or offic	e:	<b>二</b> 字型 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Pishon Partners, L	.LC		SECRETARY OF STATE AND OF CORPORATION OF CORPORATIO
		Name		<b>7. 2. 2. 3. 3. 3. 3. 3. 3. 3. 3</b>
	505 S. Flagler Drive	e, Suite 1002		S \$1
	Florida street addre	ess (P.O. Box <b>NO</b>	Γ acceptable)	- FB
	West Palm Beach,	FL 33401		_
	City	, State and Zip		
If the limited liability conconfirmed that after the cand the business office of liability company, it is he of the members of the lir or the operating agreement of the member or authorized a member or authorized the limited and the limited agreement of the limited agreement of the limited agreement of the limited liability confirmed and the limited liability concording the limited liability concording the limited liability concording the limited liability concording the limited liability confirmed that after the cand the liability confirmed that after the cand the liability company, it is he can liability company.	hange or changes are the registered agent reby confirmed that to nited liability compa	made, the Florida will be identical. the change(s) was/ ny or as otherwise lity company.	street address of the	registered office
James D. Cecil				
(Printed or typed name of signee		<del> </del>		
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm		. 71		e. I further agree to nance of my duties, as provided for in registered office ng of this change.
Signature of Registered Agent)	Member Pish	on Perhasin	-	

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