L07000019297

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APR - 1 2008

EXAMINER



ACCOUNT NO. : 072100000032

REFERENCE : 505806 7573692

AUTHORIZATION :,

ORDER DATE: March 28, 2008

ORDER TIME : 12:51 PM

ORDER NO. : 505806-075

CUSTOMER NO: 7573692

CHANGE OF AGENT

NAME: PARC WHITE WATER BAY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER:

75

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	: PARC W	HITE WATER	BAY, LLC	
2. The mailing address of					
Jacksonville, FL 322					
02/20/2007			L07000019297		
3. Date of filing/registration in Florida			4. Document number		
5. The name of the register Florida Department of		istered office a	nddress as shown c	on the records of the	
Tiorida Doparanoni or		ıl H. Drew, l	P.A.		
Name 910 Phillips So		Phillips Stre	et	08 SETAL	
		Address wille, FL 3		08 MAR 31 SECRETAR	
	•	, State and Zip	•	Samuel Samuel	
6. The name and address	of the new registered a	agent and/or o	ffice:	For E	
		n Service Co		8: 18 F STATE FLORIO	
Name 1201 Hays Street		t	AOA AE		
	Florida street addres	ss (P.O. Box N	OT acceptable)		
	Tallahassee	FL	32301		
	City,	State and Zip			
If the limited liability conconfirmed that after the cland the business office of liability company, it is he of the members of the lin or the operating agreement	hange or changes are re the registered agent we reby confirmed that the	nade, the Flor vill be identica e change(s) w	ida street address on the case of the case	of the registered office of a Florida limited I by an affirmative vote	
(Signature of a member or author	ized representative of a memi	per)			
RANGL H. DG (Printed or typed name of signee)	دري				
I hereby accept the appoint the comply with the provision and I am familiar with an Chapter 608, F.S. Or, if the address, I hereby confirms		agent and agree of to the prope ns of my positi filed to merel ity company hi	ee to act in this caper and complete pe ion as registered a y reflect a change as been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.	

(Signature of Registered Agent) Sylvia Queppet, Asst. VP

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

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