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COVER LETTER

_	stration Section sion of Corporations		
SUBJECT:	AQUOS PROPERTIES, LI (Name of	LC Limited Liability Company)	
Dear Sir or l	Madam:		
The enclosed	d Registered Agent/Registered	Office Change and fee(s) are submitted for filing	ıg.
Please return	all correspondence concerning	g this matter to the following:	
Robert J. [DeBoer, Esq. (Name of Person)		
Kanetsky,	Moore & DeBoer, P.A. (Firm/Company)		
227 Nokom	nis Avenue South		
Venice, FL	(Address)		
vernoe, i z	(City/State and Zip Code)		9
For further in	nformation concerning this mat	tter, please call:	OT NOV 28 AM 10: 25
Robert J. D	eBoer	at (_941) 485-1571	FLOT F STI
	(Name of Person)	(Area Code & Daytime Telephor	ne Nullan) 25
Regis Divis Clifto 2661	EET/COURIER ADDRESS: stration Section ion of Corporations on Building Executive Center Circle hassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Encl	osed is a check for the followi	ing amount:	
√ \\$2	5 Filing Fee	\$55 Filing Fee & Certified Copy	

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 limit	ed liability company is:	AQUOS PROPERTIES, LCC	·
2. The mailing address of	of the limited liability com	npany is : 1214 Casey Key Road, No	komis, FL 34275
April 20, 2007		L07000042870	
3. Date of filing/registra	tion in Florida	4. Document number	
5. The name of the regist Florida Department of		red office address as shown on the	records of the
•	Richard M. Hall		
		Name	
	1214 Casey Key Re		
		ddress	
	Nokomis, FL 342	tate and Zip	
< mol 1 11	• •	•	
6. The name and address	of the new registered age	nt and/or office:	2
	Melissa Hall		OT NOW 20
		ame	是 2
	937 Casey Key Ro		F. F.
	Florida street address (P.O. Box NOT acceptable)	THO .
	Mada as	0.4075	Eg
		FL 34275	- 資
	City, Sta	te and Zip	9
confirmed that after the cand the business office o liability company, it is he of the members of the li	change or changes are made f the registered agent will preby confirmed that the c	nder the laws of the State of Florida de, the Florida street address of the be identical. Or, in the case of a F change(s) was/were authorized by a r as otherwise provided in the article company.	registered office lorida limited in affirmative vote
(Signature of a member or autho	rized representative of a member)		
Richard M. Hall			
(Printed or typed name of signed	<u> </u>		
I hereby accept the apportunity with the provision and I am familiar with a Chapter 608, F.S. Or, if address I hereby confirm	intment as registered age ns of all statules relative t id accept the obligations this document is being fil that the limited liability	ent and agree to act in this capacity to the proper and complete perform of my position as registered agent of ed to merely reflect a change in the company has been notified in writin	t. I further agree to nance of my duties, as provided for in registered office ng of this change.

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