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## **COVER LETTER**

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: The Das's At Fountain Beach RESORT, LLC Name of Limited Liability Company  |
| DOCUMENT NUMBER: 26-129 9861  |
| The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitte for filing.   |
| Please return all correspondence concerning this matter to the following:   |
| Darlene Joy Miller<br>Name of Person  |
| The Oasis At Fountain Beach RESORT, LLC Name of Firm/Company  |
| 313 5, atlantic ave   |
| Daytona Beach, FL 32118 City/State and Zip Code   |
| E-mail, address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:  |
| Darlere Joy Miller at (724) 840 - 6517  Name of Person Area Code Daytime Telephone Number   |
| Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company. |
| Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee   |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

INHS17 (2/14)

Tallahassee, FL 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: The Dasis At Fountain Beach RESORT, LA  | <u>'C</u>       |
|---|-----------------|
| 2. (a) 313 S. Atlantic avid Daytona Beach, FL Principal office address of limited liability company: 32118  (Note: MUST BE STREET ADDRESS)  (Note: MAY BE POST OFFICE BOX)  | אי F<br>שב<br>3 |
| 3. Date of filing/registration in Florida  4. Document number   |                 |
| 5. (a) Chery and Richie  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  313 5. Atlantic ave Daytona Beach, FL 3218  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)   |                 |
| (b) Dariene Joy Miller Enter name of NEW Registered Office address:   |                 |
| Same address:  NEW Registered Office Address:   |                 |
|   |                 |
| 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  Chery Inn Richie  Printed or typed name of signee   |                 |
| 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 605, F.S. Or, if this document is being file 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                          | e<br>pt<br>d    |

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