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## REGISTERED AGENT CHANGE

LMP AT CENTRAL 305, LLC

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## 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. Name of the limited liability company: LMP at C	central 305, LLC	·
<ol> <li>(a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)</li> </ol>	pany: 11600 Dr. Martin Luther King, Jr. Street N St. Petersburg, FL 33716	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	11600 Dr. Martin Luther King, Jr. Street N St. Petersburg, FL 33716	
10/29/07	L07000109863	<u>.</u>
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:	<b>9</b> ≥∞
Registered Agent:	David H. Redden	<b>8</b> 50 50 50 50 50 50 50 50 50 50 50 50 50
Registered Office Address:	11207 Blue Heron Blyd, N	
•	St. Petersburg, FL 33716	
		HOF COS
AN Theorem - ANYMAN The Annual Annual Control	NOVE TO A TAKEN I STATE OF THE COLUMN	
(b) Enter name of NEW Registered Agent and/or !	NEW Registered Unice address:	<b>က်</b> ညီလို
NEW Registered Agent:	David H. Redden	
NEW Registered Office Address:  OMUST BE FLORIDA STREET ADDRESS)	EW Registered Office address:  David H. Redden  11600 Dr. Martin Luther King, Jr. Street N	
MANUE DE L'EDALDA BIRGUI RUDILESSI	St. Petersburg,FL 33716	<u> </u>
If the limited liability company is not organized under that after the change or changes are made, the Florida soffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorize liability company or as atherwise provided in the article limited liability organized.  X  (Signature of a member or authorized representative of a member)  David H. Redden, Authorized Representative (Printed or typed name of signee)	street address of the registered office and the he case of a Florida limited liability company ed by an affirmative vote of the members of es of organization or the operating agreemen	business y, it is the limited at of the
I hereby accept the appointment as registered agent at comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my posit F.S. Or, if this document is being filed to merely reflect confirm that the implest liability company has been not X (Signature of Registered Agent)	,	rec to fies, and I hapter 608, I hereby
Division of Corporations, P.Q. 1	Box 6327, Taliahassee, FL 32314	

FILING FEE: \$25.00

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