L07000127129

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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: SCHWARTZ FLOR	RIDA HOLDINGS, LLC		
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	Unit A		<u> </u>
(b) Mailing address of limited liability company:	Sarasota, Florida 34237 Same as above		_
(Note: MAY BE POST OFFICE BOX)			_
12/26/2007	L07000127129		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown	on the records of the Florida De	ept. of State:	
Registered Agent:	Jeffrey S. Russell	翠。 20	
Registered Office Address:	240 S. Pineapple Avenue, 10th Floor	7.4	T71. 7 1.
Registered Office Address.	Sarasota, Florida 34236	7 22	f
		<u> </u>	- P. 124. 124
(b) Enter name of NEW Registered Agent and/or !	NEW Registered Office addre	ss:	
NEW Registered Agent:	Jan W. Pitchford		
NEW Registered Office Address:	240 S. Pineapple Avenue, 10th Floor		
(MUST BE FLORIDA STREET ADDRESS)	Sarasota ,FL 34236		
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	e Florida street address of the re- lentical. Or, in the case of a Flo- e(s) was/were authorized by an rwise provided in the articles of y.	egistered office orida limited affirmative vote	of
Printed or typed name of signee	_0		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or if this document is being filed to address, I hereby confirm that the limited liability comp			to i,
Division of Corporations, P.O. Box FILING FEE		,	