Office Use Only



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2008 JUN -4 PH 2: 15

COVER LETTER

TO: Registration Section Division of Corporations		
Division of Corporations		
SUBJECT: 55H Management UC (Name of Limited Liability Company)		
(Name of Limité	d Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Shari Maddix (Name of Person)		
STH Management, C	<u>lc</u>	
1982 Cato Ct. (Address)		
Indialantic FL 32903 (City/State and Zip Code)	<u> </u>	
For further information concerning this matter, please call:		
Shari Maddix at (8	313, 484-3137	
(Name of Person) (A	Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
□ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (5/08)

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:	SJH Management.
2. (a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny: 1982 Coto Ct Indialontic, FL 32903
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1982 Cato Ct Indialantic, Fc 32903
March 6, 2008 3. Date of filing/registration in Florida	L08000024718 4. Document number
5. (a) Registered Agent and Registered Office shown or	
Registered Agent:	Shari Maddix
Registered Office Address:	400% W. Santiago St. Toripo, Fi 33624.
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:	
NEW Registered Agent:	Shari Maddix.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1982 Cato Ct. Indialantic ,FL 32903.
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)	
Shari Maddix.	
(Printed or typed name of signee) I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the part familiar with and accept the obligations of my position. F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified. [Signature of Registered Agent]	70. 75