## L08000060101

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800137659638

RECEIVED THE

B. KOHR

NOV - 7 2008

**EXAMINER** 

18 NOV -6 PH 4: 45



ACCOUNT NO. : 072100000032

REFERENCE : 782047 7573692

AUTHORIZATION :

COST LIMIT

ORDER DATE: November 5, 2008

ORDER TIME : 2:23 PM

ORDER NO. : 782047-040

CUSTOMER NO: 7573692

## CHANGE OF AGENT

NAME: PARC ST. LOUIS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER:

## 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.

Name of the limited liability company: PARC ST. LOUIS, LLC		
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	7892 Baymeadows Way Jacksonville, FL 32256	
06/18/2008	L08000060101	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	4. Document number the records of the Florida Dept. of State:	
Registered Agent:	Gwen H Griggs	
Registered Office Address:	7892 Baymeadows Way Jacksonville, FL 32256	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent</u> :  Corporation Service Company		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Tallahassee FL32301	
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)	d Rep.	
Guln Hutcheson Griggs (Printed or typed name of signee)	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro- im familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a c confirm that the limited liability company has been notified By:  (Signature of Registered Agent)  Kimber	UÀR' Moler	
Assistant Vice President  Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		

**FILING FEE: \$25.00**