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(Re	equestor's Name)	-
(Ac	idress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	<b>WAIT</b>	MAIL
(Ви	isiness Entity Nar	ne)
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
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ALLASSEE: FLORIDA

S. HAWKES

MAY 0 4 2010

EXAMINER

## **COVER LETTER**

	COVE	K BBI I BK	
TO: Registration Section Division of Corpora			
SUBJECT:	BAYLORH	IEATH FARM LL	.C
	Name of Limite	d Liability Company	
Dear Sir or Madam:			
The enclosed Registered A	gent/Registered Office	Change and fee(s) are	e submitted for filing
Please return all correspon	dence concerning this n	natter to the following	3:
	impson, Esquire		
	nnon, Simpson & Vul Company	œlja	
<u> </u>	ada Blvd., Suite A		
	each, FL 32174 and Zip Code		
E-mail address: (to be used for	or future annual report notificati	on)	
For further information con	ncerning this matter, ple	ase call:	
Scott E. Simpsor		386)	677-3431
STREET/COURIES Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	R ADDRESS: ions er Circle	MAILING ADDI Registration Section Division of Corpo P.O. Box 6327 Tallahassee, Florid	on orations
Enclosed is a chec	k for the following am	ount:	
\$25 Filing Fee		\$55 Filing Fee	& Certified Copy

## 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:	AYLORHEATH FARM LLC			
2. (a) Principal office address of limited liability compan				
(Note: MUST BE STREET ADDRESS)	Bunnell, FL 32110			
(b) Mailing address of limited liability company:	1860 C.R. 2006			
(Note: MAY BE POST OFFICE BOX)	Bunnell, FL 32110			
08/25/2008	L0800008106			
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:				
Registered Agent:	Wayne Heath			
Registered Office Address:	2 Spotted Sandpiper			
	Fernandina Beach, FL 32034			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				
NEW Registered Agent:	Scott E. Simpson, Esquire			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	595 W. Granada Blvd., Suite A			
(MUST BE FLURIDA STREET ADDRESS)	Ormond Beach ,FL32174			
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 anthorized representative of a member				
Bill Baylor				
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 prand I am familiar with and accept the obligations of my per Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office sy has been notified in writing of this change.			

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