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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
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J. SAULSBERRY EXAMINER

SEP 0 1 2011

COVER LETTER

TO: Registration Section Division of Corporations		
	NERS OF SANTA ROSA, LLC ed 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 r	matter to the following:	
Chris Johnston Name of Person	, 	
Name of Person		
Sentry Asset Management, LLC Firm/Company	2011 SEC TALL	
1230 Peachtree St NE - Suite 2445 Address	AUG 31 AND	
Atlanta, Georgia 30309 City/State and Zip Code	DII AUG 31 AM 8: 48 SECRETARY OF STATE ALLAHASSEE, FLORID	
cjohnston@samlllp.com E-mail address: (to be used for future annual report notificat	ion)	
For further information concerning this matter, pla	ease call:	
Chris Johnston at (404) 941-2905 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 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.

1. Name of the limited liability company: HITE SAND	S PARTNERS OF SANTA ROSA, L		
2. (a) Principal office address of limited liability company	1230 Peachtree Street, NE		
(Note: MUST BE STREET ADDRESS)	Suite 2445 Atlanta, Georgia 30309		
(b) Mailing address of limited liability company:	1230 Peachtree Street, NE		
(Note: MAY BE POST OFFICE BOX)	Suite 2445 Atlanta, Georgia 30309		
06/15/2009	L09000058431		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the	the records of the Florida Dept. of State:		
Registered Agent:	CT Corporation System		
Registered Office Address:	1200 South Pine Island Road Plantation, Florida 33324		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	V Registered Office address: CBJ Equities I, LLC		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	649 Fifth Avenue South		
	Naples ,FL34102		
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 affirmation of the innited 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 Thereby agree the appointment as registered agent and agree to act in this capacity. Figure the comply with the provisions of all statutes relative to the proper and complete performance of inconductes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.			
address, I hereby confirm that the limited liability company	has been notified in writing of this change.		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00			

INHS18 (05/08)