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APR 1 4 2011

EXAMINER



ACCOUNT NO. : I20000000195

REFERENCE : 739490 7769257

AUTHORIZATION COST LIMIT : \$25.00

ORDER DATE : April 11, 2011

ORDER TIME : 10:56 AM

ORDER NO. : 739490-020

CUSTOMER NO: 7769257

CHANGE OF AGENT

NAME: 1819 ALBERT STREET, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CONTACT PERSON: Troy Todd -- EXT# 2940

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. 1. Name of the limited liability company: 1819 ALBERT STREET, LLC 2. (a) Principal office address of limited liability company: 1819 Albert St. Jacksonville, FL 32202 (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: 251 Levy Road (Note: MAY BE POST OFFICE BOX) <u> Atlantic Beach, FL 32233</u> L09000122263 12/24/2009 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: Taylor, Maria Registered Agent: 251 Levy Road Registered Office Address: Atlantic Beach, F (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company **NEW Registered Agent:** 1201 Hays Street **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Tallahassee FL 32301 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 liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. authorized representative of a member)

Robert Callahan, Authorized Person (Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, 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 meirely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By:

(Signature of Registered Agent Sylvia Queppet, Asst. VP

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