## 110000005470

(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:					
L. SELLERS					

Office Use Only

AUG 1 9 2010

**EXAMINER** 



300184070383

08/18/10--01026--020 \*\*275.00

SEGRETARY OF STATE

## **COVER LETTER**

	gistration Section vision of Corporations					•
CLIP IF C	r. LIVINGSTON AND PINE	' RTDO	I.I 42	.C		
SUBJECT	· · · · · · · · · · · · · · · · · · ·		<del></del>		omnany	-
	Name of	Limite	u Liab	miy Co	ompany	
Dear Sir o	r Madam:				•	
The enclo	sed Registered Agent/Registered	Office	Chang	e and f	See(s) are submitted for filing.	
Please reti	urn all correspondence concerning	this n	natter t	o the fo	ollowing:	
David K	. Fowler					
	Name of Person					
Henders	son, Franklin, Starnes & Ho	olt, 1	P.A.			
	Firm/Company					
1648 Pe	riwinkle Way, Suite B					
	Address					
Sanibel	., FL 33957					
	City/State and Zip Code			<del></del>		
	owler@henlaw.com					
E-mail	address: (to be used for future annual report	notificat	ion)			
For furthe	r information concerning this mat	ter, plo	ease ca	11:		
David l	lowler	at (	239	,	344-1353	
<u>Davia</u>	Name of Person	_ " (_	437	Area C	ode & Daytime Telephone Number	-
O.T.	DEDETICOUNIES A DESCRIC				C ( DDDDEGG	
	REET/COURIER ADDRESS:				G ADDRESS:	
	Registration Section Registration Section Division of Corporations Division of Corporations					
	fton Building			O. Box		
	61 Executive Center Circle				ee, Florida 32314	
	llahassee, Florida 32301				,	
En	closed is a check for the followi	ng am	ount:			
X	\$25 Filing Fee		<u> </u>	55 Fili	ing 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:LIVINGSTON	AND PINE RIDGE, LLC
2. (a) Principal office address of limited liability company	;
(Note: MUST BE STREET ADDRESS)	4100 Center Pointe Dr. Suite 108 Fort Myers, FL 30916
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	Same as above
1/14/2010	L1000005470
3. Date of filing/registration in Florida	1. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	David A. Beyer (Resigned)
Registered Office Address:	100 N. Tampa St., Suite 200 Tampa, FL 33602
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	/ Registered Office address:
NEW Registered Agent:	David K. Fowler
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Henderson, Franklin, Starnes & Holt, P.  1648 Periwinkle Way, Suite B Sanibel,FL33957
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherworthe operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  Printed or typed name of signee  I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the propand I am familiar with and accept the obligations of my position of the provisions of the propand I am familiar with and accept the obligations of my position of the propand I hereby confirm that the limited liability company of Signature of Registered Agent	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by a final limited was/were authorized by an affirmative vote vise provided in the articles of a Florida limited was/were authorized by a final limited was/were authorized by a fi

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