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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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SECRE IN CORPORATIONS

N. Culligan MAR 182011

COVER LETTER

TO: Registration Section
Division of Corporations

| UBJECT: J.C. Park Family LLC | | |
|---|----------------------------------|--|
| Name of Limited 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 matter to the following: | | |
| JAMES C. PAR | K. PRES. | |
| J. C. PARK FAMILY LLC Firm/Company | | |
| 12805 YACHT CLUE Address | 3 Cir. | |
| FT MYERS F City/State and Zip Code | L 33919 | |
| E-mail address: (to be used for future annual report notification) | | |
| For further information concerning this matter, please call: | | |
| James C. Park at (239) 243 8776 Name of Person Area Code & Daytime Telephone Number | | |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: | |
| Registration Section | Registration Section | |
| Division of Corporations | Division of Corporations | |
| Clifton Building | P.O. Box 6327 | |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 | |
| Tallahassee, Florida 32301 | | |
| Enclosed is a check for the following amount: | | |
| \$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. 12805 Yacht Club Circle 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Fort Myers, FL 33919 Same (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) L10000008528 24 January 2010 Document number 3. Date of filing/registration in Florida 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Patrick B. Casey, J.D., CPA Registered Agent: 9240 Bonita Beach Road, Suite 1109 Registered Office Address: Bonita Springs, FL 34135 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address **NEW** Registered Agent: **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) 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 ARK JAMES 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 merely reflect a change in the registered office address. I hereby confirm that the limited hability company has been notified in writing of this change.

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

Signature of Registered Agent