

L10000062122

Florida Department of State
Division of Corporations
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LLC REGISTERED AGENT CHANGE
OMEGA COMMUNITIES, LLC

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J. BRYAN

AUG -9 2012

EXAMINER

8/8/2012

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: Omega Communities, LLC
2. (a) Principal office address of limited liability company: 2120 NORTHGATE PARK LANE
SUITE 102
CHATTANOOGA TN 37415
- (Note: **MUST BE STREET ADDRESS**)
- (b) Mailing address of limited liability company: 2120 NORTHGATE PARK LANE
SUITE 102
CHATTANOOGA TN 37415
- (Note: **MAY BE POST OFFICE BOX**)

- 06/09/2010 L10000062122
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: THE GILMORE LAW FIRM PA
- Registered Office Address: ATTN: ROBERT A. GILMORE ESQ
120 BENNING DRIVE, STE. 1
DESTIN FL 32541 US

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
- NEW Registered Agent:** C T Corporation System
- NEW Registered Office Address:** 1200 South Pine Island Road
(MUST BE FLORIDA STREET ADDRESS) Plantation, FL 33324

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.

Edward T Adams
 Signature of a member or authorized representative of a member

Edward T Adams
 Printed or typed name of signer

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 liability company has been notified in writing of this change.

By: Nathan S. Giffin
 Signature of Registered Agent

Nathan S. Giffin Asst. Secretary
 Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
 FILING FEE: \$25.00

FNHS18 (05/08)

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