

U10000078887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

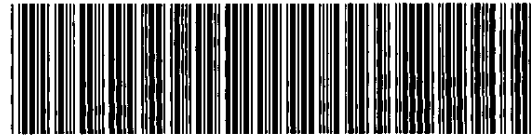
(Business Entity Name)

(Document Number)

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EXAMINER

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# KRASNY AND DETTMER

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS  
ATTORNEYS AND COUNSELORS AT LAW

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304 S. HARBOR CITY BOULEVARD, SUITE 201  
MELBOURNE, FLORIDA 32901  
TELEPHONE (321) 723-5646  
TELECOPIER (321) 768-1147  
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Δ FLORIDA SUPREME COURT CERTIFIED  
MEDIATOR-ARBITRATOR  
\* BOARD CERTIFIED IN TAXATION  
† CERTIFIED PUBLIC ACCOUNTANT

August 30, 2010

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Harbor Cove Development Group, LLC  
Riverside Drive Development Group, LLC


Dear Sir or Madam:

Please find enclosed two (2) Statement of Change of Registered Office or Registered Agent forms for the above referenced limited liability companies for filing, along with their respective cover letters.

Thank you for your attention to this and please let us know if you need anything further.

Very truly yours,

KRASNY AND DETTMER

  
\_\_\_\_\_  
Debra Campos  
Dale A. Dettmer

/dc  
Enclosures

2010 SEP -1 AM 9:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Harbor Cove Development Group, 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:

Dale A. Dettmer, Esq.  
Name of Person

Krasny and Dettmer  
Firm/Company

304 S. Harbor City Blvd, Suite201  
Address

Melbourn,e FL 32901  
City/State and Zip Code

jkaufmanassoc@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra Campos at ( 321 ) 723-5646  
Name of Person 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 amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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: Harbor Cove Development Group, LLC

2. (a) Principal office address of limited liability company: \_\_\_\_\_

(Note: **MUST BE STREET ADDRESS**) 304 S. Harbor City Blvd, Suite 201  
Melbourne, FL 32901

(b) Mailing address of limited liability company: \_\_\_\_\_

(Note: **MAY BE POST OFFICE BOX**) \_\_\_\_\_  
\_\_\_\_\_

July 27, 2010  
3. Date of filing/registration in Florida

L10000078887  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Dale A. Dettmer

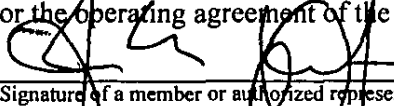
Registered Office Address: 304 S. Harbor City Blvd, Suite 201  
Melbourne, FL 32901

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:** James M. Kaufman

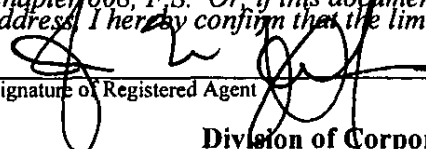
**NEW Registered Office Address:** 19151 Fox Landing Dr  
Boca Raton, FL 334  
**(MUST BE FLORIDA STREET ADDRESS)**

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

James M. Kaufman  
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 liability company has been notified in writing of this change.*

  
\_\_\_\_\_  
Signature of Registered Agent

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

FILED  
20 SEP - AM 9:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA