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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE OBX FLORIDA INVESTMENTS, LLC

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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 605.0114, 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.

 Name of the limited liability company: OBX Florid 	la Investments, LLC		
 (a) Principal office address of limited liability con (Note: MUST BE STREET ADDRESS) 	npany: 113 Osprey Ln Southam Shores, North Caroli	na 27949	
	**************************************	<u> </u>	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	198 Osprey Ln Southern Shores, North Caroli	na 27949 C	
		in ~	
4/3/2012	L12000045B76		
3. Date of filing/registration in Florida	 Document number 	= 70	
5. (a) Registered Agent and Registered Office show	n on the records of the Florida Dep	OR OF States	
Registered Agent;	Business Filings Incorporated		
Registered Office Address:	1203 GOVERNORS SQUARE BU TALLAHASSEE, FL 32301	VD., SUITE 101	
(b) Enter name of NEW Registered Agent and/o	r NEW Registered Office address	<u>s</u> :	
NEW Registered Agent:	Business Filings Incorporated	Business Filings Incorporated	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	S15 E. Park Avenue		
	Talishassee	.FI,32301	
If the limited liability company is not organized undo confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the charthe members of the limited liability company or as off the operating agreement of the limited liability company. Signature of a member or hatheriesd representative of a member.	the Florida street address of the regidentical. Or, in the case of a Floridances, was/were authorized by an a	gistered office Ida limited ffirmative vote of	
Charles M. Walton, Manager			
Printed or typod name of signoc			
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to t and I am familiar with oad accept the obligations of Chapter 605, F.S. Or, if this document is being filed address. I hereby confirm that the limited liability confirm that	and agree to act in this capacity, the proper and complete performany position as registered agent as to merely reflect a change in the rimpany has been notified in writing	l further agree to ice of my duties, provided for in custered office of this change.	
Signature of Registered Agent Mark Williams, A.V.P., Bus	siness Filings Incorporated		
Division of Corporations, P.O. B	lox 6327, Tallahassee, FL 32314		

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