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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY			
Pursua submits	nt to the provisions of sections 605.0114 or 605.0116, the following statement in order to change its register	, Florida ed office	Statutes, the undersigned limited liability company or registered agent, or both, in the State of Florida.
I. Na	me of the limited liability company:Schiavone Beach,	LLC	
2. (a)		(b)
	Principal office address of limited hability company: (Nute: MUST BE STREET ADDRESS)	·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3751 Ortega Boulevard		3751 Ortega Boulevard
	Jacksonville, Florida 32210	_	Jacksonville, Florida 32210
3.	Date of filing/registration in Florida	- 4.	Document number
5. (a)	Fisher, Tousey, Leas & Ball, P.A.		
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	501 Riverside Avenue, Suite 600		
	Jacksonville, FL	32202	
(b)	Frank E. Schiavone		
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:
	NEW Registered Office Address;		
	3751 Ortega Boulevard		· 1 C · · · · ·
	Jacksonville FL	32210	
If the b	miled liability company is not organized under the law	is of the	54
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 your of the members of the limited liability company or as otherwise new ided in			

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

Frank E. Schiavone, as Manager

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 605, 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.

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

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