L98000001580

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TRANSMITTAL LETTER

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03 AUG 20 PH 2: 40

TO: Amendment Section Division of Corporations

FALLAHASSEE, FLORIDA

SUBJECT: Karawood, L	.C.		<u></u>				
(Name of corporation)							
DOCUMENT NUMBER: L98	3000001580	=					
The enclosed Statement of Change	of Registered Off	ñce/Agent an	d fee are submi	tted for filing.			
Please return all correspondence cor	ncerning this mat	ter \overline{to} the following terms and the following terms are the following ter	lowing:	·			
William R. Smith, Eso (Name of person	quire	-	: · · · · · · · ·	4 <u>7</u>			
				पूर्व च च			
(Name of firm/con	ipany)						
8191 College Parkway			•				
(Address)							
Fort Myers, FL 3391 (City/state and zip	9 code)						
For further information concerning	this matter, pleas	e call:					
William R. Smith, Esqu (Name of person)	ire at (2	.39 <u> </u>	82-8511 ytime telephone	number)			
Enclosed is a \$35.00 check made pa	yable to the Dep	artment of St	ate.				
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Se Division of Con 409 E. Gaines S Tallahassee, FL	ction porations treet					

CR2E045(07/02)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

					FILED	
Pursuant to the	provisions of section	s 607.0502, 61	7.0502, 607.1	508, or 617.15	98, Florida Statutes,	
this statement of	change is submitted j	for a corporatio	n organized u	nder the laws oj	the state 30 PM 2:	ĻΩ
Florida	in order to cha	nge its register	ed office or re	gistered agent,	or both, in the State	
of Florida.					TALLAHASSEE, FLOR	lDΑ
1. The name of t	he corporation:	Karawood,	_r.c.		<u> </u>	-
2. The principal	office address:	2180 Immo	<u>kalee Roa</u>	d, #316		-
		Naples, F	L 34110			-
3. The mailing a	ddress (if different):_	2430 Vand	erbilt Be	ach Road,	#108-179	-
		Naples, F			· · · · · · · · · · · · · · · · · · ·	-
4. Date of incorp	oration/qualification:	8/20/98	Doc	ument number:	L98000001580	
	street address of the tment of State:	current registere	ed agent and re	egistered office	on file with the	
_	None					
,						
-						
6. The name and changed):		ne new registere		nanged) and /or	registered office (if	
	8191 C	ollege Par	kway, #20) 4		
_	(P.O	. Box or personal mail	oox NOT acceptable)	 -	
_	Fort M	yers, FL	33919	<u> </u>		
The street address agent, as change	ss of its registered of d will be identical.	fice and the stre	eet address of	the business of	ice of its registered	
Such change wa authorized by th	s authorized by resol e board, or the corpo	ution duly ador ration has been	ted by its boar notified in wr	rd of directors of iting of the cha	or by an officer so	
(Signature of an officer,	Chairman or vice chairman of t	he board)		ek Woods, 1		
I further agree to performance of the registered agent	the appointment as ro o comply with the pro my duties, and I am f . Or, if this documen hereby confirm that	ovisions of all s amiliar with an it is being filed	tatutes relatived accept the of merely to refle	e to the proper obligation of my ect a change in	and complete position as the registered	
	gnature of Registered Agent)	we .	· · · · · · · · · · · · · · · · · · ·	8/14/ (Date)	03	
If signing on behalf	of an entity:			(
	wmed or Printed Name)	· · · · ·		(Canacity)	The state of the s	; .

* * * FILING FEE: \$35.00 * * *