



L99000002196

ACCOUNT NO. : 072100000032

REFERENCE : 140875 11102A

AUTHORIZATION : *Patricia Pappas*

COST LIMIT : \$ 25.00

ORDER DATE : May 7, 2001

ORDER TIME : 10:27 AM

ORDER NO. : 140875

CUSTOMER NO: 11102A

CUSTOMER: Mr. Thomas C. Shaw
Lefkowitz & Bloom, P.a.
430 North Mills Avenue

600004139286--5

Orlando, FL 32803

CHANGE OF AGENT

NAME: EMILY GRACE, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Betty Young -- EXT# 1112

EXAMINER: *JB*

5-7-01

TO AGENCY
SUFFICIENCY OF FILING

2001 MAY -7 PM 12:09

RECEIVED
DEPARTMENT OF STATE
DIVISION OF OPERATIONS

01 MAY -7 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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. The name of the limited liability company is: EMILY GRACE, I.L.C.
2. The mailing address of the limited liability company is: 235 Hunt Club Boulevard, Suite 101
Longwood, Florida 32779

3. Date of filing/registration in Florida: 04/19/1999
4. Document number: 199000002196

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

WAYNE BENTLEY
Name
1043 Lakeside Drive
Address
Apopka, Florida 32712
City, State and Zip

6. The name and address of the new registered agent and/or office:

CALVIN T. MILAM
Name
235 Hunt Club Boulevard, Suite 101
Florida street address (P.O. Box NOT acceptable)
Longwood FL 32779
City, State and Zip

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.

Calvin T. Milam
(Signature of a member or authorized representative of a member)

CALVIN T. MILAM
(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.

Calvin T. Milam
(Signature of Registered Agent) CALVIN T. MILAM

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

01 MAY - 7 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
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