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(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)			
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)		
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03 OCT -3 PM 3: 29

ALLAHASSEE, FI ORIDA

August 26, 2003

KARATOM, L.L.C. 8191 COLLEGE PARKWAY #204 FT. MYERS, FL 33919

SUBJECT: KARATOM, L.L.C. Ref. Number: L99000002535

We have received your document for KARATOM, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 803A00048121

Agnes Lunt Document Specialist

## TRANSMITTAL LETTER

FILED

03 OCT -3 PM 3: 29

SCOM LANGE OF STATE LALLAHASSEE, FLORIDA

SUBJECT: Karatom, L.L.C.

(Name of corporation)

DOCUMENT NUMBER: L9900002535

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William R. Smith, Esquire
(Name of firm/company)

8191 College Parkway, #204
(Address)

Fort Myers, FL 33919
(City/state and zip code)

For further information concerning this matter, please call:

William R. Smith, Esquire at (239 ) 482-8511
(Name of person)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY FILED

#108-179

Pursuant to the provisions of sections 608.416 or 6 liability company submits the following statement in agent, or both, in the State of Florida.	order to change its registered office of registered
The name of the limited liability company is:	Karatom, L.L.C.LAMASSEE, L.
2. The mailing address of the limited liability company	
	Naples, FL 34109
5/4/99	L99000002535
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered of Florida Department of State:	office address as shown on the records of the
Chris Karakosta	c/o Quarles & Brady
Name	e
<u>4501 Tamiami Tra</u> Addre	
Naples, FL 3410	
City, State a	and Zip
6. The name and address of the new registered agent an	nd/or office:
<u>William R. Smith,</u>	Esquire
Name	
8191 College Park	
Florida street address (P.O.	Box NO1 acceptable)
Fort Myers FL	33919
City, State an	d Zip
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be idliability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company.	e Florida street address of the registered office lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote of rwise provided in the articles of organization or
(Signature of a member or authorized representative of a member)	<del></del> .
F. Derek Woods, Member	
(Printed or typed name of signee)	<del></del>
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp  (Signature of Registered Agent)	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.

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

INHS18(10/99)

FILING FEE: \$25.00