2000	O'UNIFORM BUSI	NESS REPO	PRT_(UBI	R)			
DOCUMENT # 1. Entity Name							
				FILED			
IVEY ROAD DEVELOPMENT, L.L.C.				FILED OO HAR -8 AM 10: 5	52 W	3/1	
Principal Place of Business		Mailing Address		SECRETARY OF STA	ATE RIBA	, 14	
2. Principal Place of Business 3. Mailing Address 3840 Crown Point Rd., Ste A 3840 Cro			oint Rd				
Suite, Apt. #, etc. Suite A		Suite, Apt. #, etc. Suite A.		DO NOT WRITE IN THIS SPACE			
City & State .		City & State		4. FEI Number		Ar	plied For
Jacksonville, FL 32257 Zip Country 32257		Jacksonville, FL		59-3621502			
		Zip 32257	Country	5. Certificate of Status Desired	sus Desired		
	6. Name and Address of Current F		 Name	7. Name and Address of New	Registered Ag	jent	
Tosen	h D. Collins						
3840	Crown Point Rd., Ste	A		ddress (P.O. Box Number is Not Acceptab	le)		
Jacks	onville, FL 32257					Zin Cont	
			City		FL	Zip Code	e
8. The above	named entity submits this statement for	the purpose of changing its	registered office or	registered agent, or both, in the State of F	lorida.		
SIGNATURE .							
SIGNATORIE .	Signature, typed or printed name of registered agent at	nd title if applicable. (NOT	E. Registered Agent signati	ure required when reinstating)	DATE		_
		FARE SELECTION S	OWIII FEE IS \$ syable to Departs	以上に受けることに対している。(2) (2) (2) (2) (2) (2) (2) (2) (2) (2)			
9.	MANAGING MEMBE	RS/MEMBERS	I 10.		S/CHANGES		
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NAME	The Collins Group, I	nc.	NAME	-03/2	22/0001	1003	023
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TITLE	Jacksonville, FL 32	257 □ Delete	TITLE		[Change	☐ Addition
NAME			NAME		•		
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			STREET ADDRESS				
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٠ .		☐ Delete	TITLE ~			Change	☐ Addition
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		•	CITY-ST-ZIP				
indicated		his filing does not qualify for at my signature shall have	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP r the exemption stat the same legal effect	ed in Section 119.07(3)(i), Florida Statutes. t as if made under oath; that I am a mana	I further certify	that the in	formati

SIGNATURE: Mark A Knowles,

Mark An Knowles, VP of MGR

2/25/00

904-268-8500