M 0000000

ACCOUNT NO. :

072100000032

REFERENCE

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE: May 20, 2002

ORDER TIME: 3:43 PM

ORDER NO. : 588129-015

CUSTOMER NO: 7287317

CUSTOMER: Ms. Amy Crisp

Echelon Companies

Suite 200

450 Carillon Parkway

Saint Petersbur, FL 33716

CHANGE OF AGENT

NAME: ECHELON DEVELOPMENT LLC

400005575954--8

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

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.

agent, or both, in the State of Florida.	
1. The name of the limited liability company is:Echelon Development LLC	·
2. The mailing address of the limited liability company is: 450 Carillon Parkw	ray, Suite 200
St. Petersburg, FL 33716	
3/3/2000 M0000000429	
3. Date of filing/registration in Florida 4. Document number	;
5. The name of the registered agent and the registered office address as shown on the Florida Department of State:	ne records of the
Susan G. Johnson	
Name	
450 Carillon Parkway, Suite 200	
Address	
St. Petersburg, FL 33716	700 C
City, State and Zip	₽ EC >2
6. The name and address of the new registered agent and/or office:	FILED 02 MAY 20 AN II: 48 SECRETARY OF STATE ALLAHASSEE, FLORID
Corporation Service Company	SSE SO I
Name	
1201 Hays Street =	F.S. = 0
Florida street address (P.O. Box NOT acceptable)	I: 48
Tallahassee FL 32301	
City, State and Zip	
If the limited liability company is not organized under the laws of the State of Flor confirmed that after the change or changes are made, the Florida street address of and the business office of the registered agent will be identical. Or, in the case of liability company, it is hereby confirmed that the change(s) was/were authorized by the members of the limited liability company or as otherwise provided in the article the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)	777 1. 1::4
Amy L. Crisp	
(Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to act in this capa comply with the provisions of all statutes relative to the proper and complete performed in a manifest with and accept the obligations of my position as registered age Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in address, I hereby confirm that the limited liability company has been notified in we (Signature of Registered Agent)	city. I further agree to ormance of my duties, ent as provided for in the registered office riting of this change.

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

FILING FEE: \$25.00

INHS18(10/99)