

ACCOUNT NO. : 072100000032

REFERENCE :

818069

5018736

AUTHORIZATION

COST LIMIT :

ORDER DATE: August 31, 2000

ORDER TIME : 2:31 PM

ORDER NO. : 818069-015

CUSTOMER NO:

5018736

CUSTOMER:

Ms. Dollie Lewis

Conam Management Corporation

1764 San Diego Ave.

San Diego, CA 92110-1997

CHANGE OF AGENT

NAME:

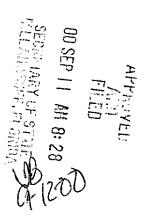
LAKES AT WELLEBY INVESTORS LLC

900003388799--4

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom



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 limite	d liability company i	s: LAKES A	T WELLEBY INVEST	ORS LLC	
2. The mailing address of	the limited liability	company is	·		
1764 San Diego Ave	nue, San Diego Ca	A 92110	_	-	
March 17, 2000	M0000000512				
Date of filing/registrati	on in Florida		4. Document nu	mber	
5. The name of the registe Florida Department of S		istered offic	e address as shown	on the records of the	e
	NRAI	Services,	Inc.		
		Name		•	
426 E. Park Avenue				_	
		Address		-	_
Tallahassee, Florida 32301				<u>-</u>	
	City	y, State and	Zip		
6. The name and address of	of the new registered	agent and/or	office:		
			_		
	Corporation	on Service	Company	•	
	1201	Name Hays Stre	+		
-	Florida street addre				
	i ioilda sircei addic	.ss (1 .O. Do.	ritor acceptable)		
	Tallahassee	FL	32301		
·	City,	State and Z	.p	•	
If the limited liability come confirmed that after the chand the business office of liability company, it is here the members of the limited the operating agreement of	ange or changes are the registered agent very confirmed that the liability company of	made, the Fl vill be identi le change(s) r as otherwis	orida street address cal. Or, in the case was/were authorize	of the registered off of a Florida limited d by an affirmative	vote of
Signature of a riember or authorize	zed representative of a mem	beri	-		
Signature of a member or authorize. Scott Dupree, Vice	President of the	ne General	. Partner of the	Managing	
Member 			_	-	
(Printed or typed name of signee)				ومعو	
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	s of all statutes rel ativ	ve to the pro	ner and complete n	ertormance of misdi	ittoc
(Signature of Registered Agent)	/1/W			77	- ř.
,o	Bobbie J. Hall,	Asst. V.P	,	75 T	The state of the s

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

INHS18(10/99)

FILING FEE: \$25.00

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