

MU3000001991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

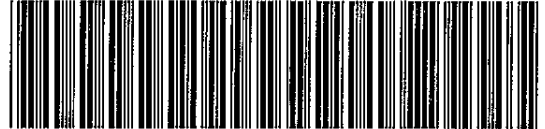
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 095414 7381577

AUTHORIZATION :

Patricia Pizeto

COST LIMIT : \$ 25.00

ORDER DATE : December 20, 2004

ORDER TIME : 10:27 AM

ORDER NO. : 095414-015

CUSTOMER NO: 7381577

CUSTOMER: Ms. Eileen Burnjas
Menke Partnerships
2524 Osprey Avenue South
Sarasota, FL 34239

CHANGE OF AGENT

NAME: CREIGHTON OFFICE CENTER, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY

CONTACT PERSON: Sara Lea

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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.

- | | |
|---|--------------------|
| June 12, 2003 | M03000001991 |
| 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 records of the Florida Department of State: | |

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TALLAHASSEE, FLORIDA

- Corporation Service Company
-
- Name
1201 Hays Street
-
- Florida street address (P.O. Box **NOT** acceptable)
-
- Tallahassee FL 32301
-
- City, State and Zip

(Signature of a member or authorized representative of a member)

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.

FILING FEE: \$25.00