


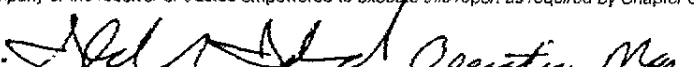


FILED
Jul 29, 2004 08:00 AM
Secretary of State

DOCUMENT # M03000003242		Secretary of State	
1. Entity Name GRG PROPERTIES, LLC			
Principal Place of Business 715 E. MAIN ST. COLQUITT, GA 39837		Mailing Address 715 E. MAIN ST. COLQUITT, GA 39837	
DO NOT WRITE IN THIS SPACE			
		07262004 No Chg-LLC CR2E083 (10/03)	
		4. FEI Number 20-0207557	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		DO NOT WRITE IN THIS SPACE	
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 Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____</small>			
Filing Fee is \$50.00 Due by September 8, 2004			
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GARLAND, GERALD R P.O. BOX 125 COLQUITT, GA 39837	 07/29/04-80001-008 50.00	
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		DO NOT WRITE IN THIS SPACE	
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE:  Operating Mgr.		7-24-04 (229) 758-3200	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>	