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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: BNP Resort Maragement, LC. (Name of Limited Liability Company)
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Stacy W. Goodsby  (Name of Person)  Brolond Companies  (Firm/Company)
2101 W. Ceinton Ave., Ste 501
(City/State and Zip Code)
For further information concerning this matter, please call:
Stacey Goolshy at (25le) 713-3636 XIII  (Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$\sum \text{\$\sum \\$55 Filing Fee & Certified Copy}\$

## 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 limited liability company is: BNP	Kesort Management, LCC.	
2. The mailing address of the limited liability company is:	2101 W. Clinton Ave.	
	5805	
1/25/08	m04000001074	
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registered office	e address as shown on the records of the	
Florida Department of State:  ALA Registered Ager  Name	y 10c.	
92 Sad berry Road	<u>d</u>	
Quincy, FL 323 City, State and 2	351 Zip	
6. The name and address of the new registered agent and/or office:		
Brenda Buschmann		
Florida street address (P.O. Box NOT acceptable)		
Parama Cty Beach FL 3 City, State and Zi	•	
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.	
(Signature of a member or authorized representative of a member)		
Louis W. Breland (Printed or typed name of signee)	TATE OR THE TATE OF THE TATE O	
I hereby accept the appointment as registered agent and agently with the provisions of all statutes relative to the provision and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company (Signature of Registered Agent)		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00