

Auden McClosky Ch5 4/3/2007 9:35 AM PAGE 2/003 Fax Server

Division of Corporations

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Florida Department of State
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To:

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Fax Number : (850) 205-0380

From:

Account Name : EUDEN, MCCLOSKEY, SMITH, SCHUSTER & RUSSELL P.A. (ST.
Account Number : 076077001601
Phone : (727) 502-8200
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REGISTERED AGENT CHANGE

PARRISH PROPERTIES VI, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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Ruden, McClosky, Smith, Schnitzer & Russell, P.A.
150 Second Avenue North
St. Petersburg, Florida 33701
(727) 502-8200 Main Office
(727) 502-8282 Main Fax

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To: Division of Corporations
Company: Florida Department of State
Date: 4/3/2007 9:29:44 AM
Fax Number: 1-850-205-0380 Pages: 3
From: Sharon Blydenburgh on behalf of Bonnie Barnhill
Direct Phone: 727-502-8256 Direct Fax: 727-502-8956
Client: 99999 Matter: 0100

RE: Parrish Properties VI, LLC - Statement of Change of Registered
Office or Registered Agent

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY PRIVILEGED AND CONFIDENTIAL. INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE (IF LONG DISTANCE, PLEASE CALL COLLECT) AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

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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: PARRISH PROPERTIES VI, LLC
2. The mailing address of the limited liability company is: P. O. BOX 560488, PLEASANT PRAIRIE, WI 53518

1/15/2005

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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:

DAVID S. BERNSTEIN, ESQ.

Name

150 SECOND AVENUE NORTH, 17TH FLOOR

Address

ST. PETERSBURG, FLORIDA 33701

City, State and Zip

6. The name and address of the new registered agent and/or office:

JOHN L. PARRISH

Name

4038 N.W. BLIGHTON ROAD

Florida street address (P.O. Box NOT acceptable)

OCALA

FL 34482

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

John L. Parrish
(Signature of a member or authorized representative of a member)

John L. Parrish
(Printed or typed name of signer)

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.

John L. Parrish
(Signature of Registered Agent)

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

FILING FEE: \$25.00

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