

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number :

: (850)617-6380

From:

Account Name : TRIAD PROFESSIONAL SERVICES LLC COA

Account Number : I20080000085 Phone : (770)777-2091

Fax Number : (770)220-1943

SECRETARY OF STATE

REGISTERED AGENT CHANGE

LANE REALTY CONSTRUCTION, LLC

RECEIVED 09 FEB -4 AM 8: 00 ECRETARY OF STATE LAHASSEE, FLORIDA

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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: Lane Realty Construction, LLC 2. The mailing address of the limited liability company is: 11390 OLD ROSWELL ROAD, SUITE 100 ALPHARETTA GA 30004 M05000000423 4. Document number 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: NATIONAL CORPORATE RESEARCH, LTD., INC. Name 515 E. PARK AVE Address 32301 US TALLAHASSEE FL City, State and Zip 6. The name and address of the new registered agent and/or office: NRAI Services, Inc. Name 2731 Executive Park Drive, Suite 4 Florida street address (P.O. Box NOT acceptable) Weston 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. /s/Eric J. Hade (Signature of a member or authorized representative of a member) (Printed of typed name of signop) 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. NRAI Services, Inc. (Signature of Registered Agent Jennifer Mailk, Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18 (8/05)

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