M05000006393

(Requestor's Name	e)
(Address)	
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(City/State/Zip/Pho	ne #)
	—
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(Business Entity Na	ame)
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SECRETARY OF STATE TALLAHASSEE, FLORID

FILED

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Page VI, LLC, an Indiana con (Name of)		gistered to do business in Florida lity 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:
Charles Mann		<u> </u>
(Name of Person)		
Pavese Law Firm		
(Firm/Company)		_
1833 Hendry St.		
(Address)		<u> </u>
Fort Myers, FL 33901	<i>"</i>	
(City/State and Zip Code)		
For further information concerning this matt	ter, please call	:
Charles Mann	at (239	336-6242
(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	ng amount:	
✓ \$25 Filing Fee	\$5	5 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.

agent, or both, in the State of Florida.	if	
1. The name of the limited liability com	pany is: Page VI, LLC, an Indiana corporation registered to do business in Florida	
2. The mailing address of the limited lia	ability company is: 333 East Ohio St., Suite 200	
Indianapolis, IN 46204		
•	· · · · · · · · · · · · · · · · · · ·	
11/18/2005	M0500006393	
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and Florida Department of State:	the registered office address as shown on the records of the	
Richard D	. Yovanovich, Esq.	
A CONTRACTOR	Name Pri 3	
4001 N. Ta	miami Trial, Suite 300	
Address Naples, Florida 34103 Address Naples Address		
<u>ivapies, ric</u>	City, State and Zip	
C 701 1 11 0.4		
6. The name and address of the new reg	istered agent and/or office:	
Charles Ma	ann DRIE 09	
1833 Hend	Name · · · · · · · · · · · · · · · · · · ·	
ST THE REPORT OF STATE OF Florida Street	traddress (P.O. Box NOT acceptable)	
	No. 2 And 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
1. The marke of the limited ForthWhele	A A FLA33901 agains of the engineers of squares of the engineering	
ar property of the second	City, State and Zip	
confirmed that after the change or change and the business office of the registered liability company, it is hereby confirmed of the members of the limited liability or the operating agreement of the limite	Member	
(Signature of a member or authorized representative	of a member)	
Paul Pittman (Printed or typed name of signee)		
~ //		
I hereby accept the appointment as reg comply with the provisions of all statute and I am familiar with and accept the o Chapter 808, F.S. Or, if this document address, I hereby confirm that the limite	istered agent and agree to act in this capacity. I further agree to s relative to the proper and complete performance of my duties, bligations of my position as registered agent as provided for in is being filed to merely reflect a change in the registered office ad liability company has been notified in writing of this change.	
(Signature of Registered (gent)		
/ / Division of Corners	tions, P.O. Box 6327, Tallahassee, FL 32314	

FILING FEE: \$25.00