## 1100000002046

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100079141451

08/28/06--01034--016 \*\*35.00

DIVISION OF CORPORATIONS

J. BRYAN SEP 1 2 2006



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 29, 2006

RICHARD AARONSON ST JOHNS LANDING OFFICE 3499 U.S. HIGHWAY 17 NORTH GREEN COVE SPRINGS, FL 32043

SUBJECT: WATERSOUND REALTY PARTNERS, LLC

Ref. Number: M06000002046

We have received your document for WATERSOUND REALTY PARTNERS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 306A00052852

Joey Bryan Document Specialist DIVISION OF CORPORTATIONS

## **COVER LETTER**

Division of Corporations		•
SUBJECT: Watersound Realty (Name of Limited	Y Partners, LLC I Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office O	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Richard Aaronson (Name of Person)	06 St	DINIG
St. Johns Landing Of-fic	=	- FARY
3499 U.S. Highway 17	North	RPORATIONS AM 8: 06
Green Cove Springs FL 3 (City/State and Zip Obde)		0,
For further information concerning this matter, plea	ase call:	
(Name of Person) at (	(Area Code & Daytime Telephone Nu	ımber)
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 amo	unt:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (8/05)

## 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 1 tortaa.		
1. The name of the limited liability company is:	Watersound Realty Pa	Mners LLC
2. The mailing address of the limited liability co	ompany is: 3455 Peach Free	Rd. Ste 17
Atlanta, GA 3	30326	
April 2006  3. Date of filing/registration in Florida	M060000204  4. Document number	6
5. The name of the registered agent and the registered agent agen	n Service Company Name 3397	SECRETARN DIVISION OF C 06 SEP 11
<u> 3499 U.S. H</u>	gent and/or office:  Aronson  Ading Office  Name  Ighway 17 North  s (P.O. Box NOT acceptable)	OF STATE OF STATIONS AM 8: 06
City,	tate and Zip	
If the limited liability company is not organized confirmed that after the change or changes are mand the business office of the registered agent will liability company, it is hereby confirmed that the of the members of the limited liability company or the operating agreement of the limited liability of the limited liability of the limited liability of the limited liability of liability of limited liability of liability o	nade, the Florida street address of the regis ill be identical. Or, in the case of a Florida change(s) was/were authorized by an affior as otherwise provided in the articles of y company.	tered office a limited irmative vote
Richard S. Aaronson	••)	
(Printed or typed name of signee)	<del></del>	
I hereby accept the appointment as registered as comply with the provisions of all statutes relative and I am familiar with and accept the obligation chapter 608, F.S. Or, if this document is being faddress, I hereby confirm that the limited liability	gent and agree to act in this capacity. I fue to the proper and complete performance s of my position as registered agent as profiled to merely reflect a change in the registy company has been notified in writing of	rther agree to of my duties, wided for in stered office this change.

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

(Signature of Registered Agent)