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(Address)				
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

OCT 1 0 2008

EXAMINER

COVER LETTÊR

Division of Corporations						
SUBJECT: CGC 8, LLC (Name of Limited Liability Company)						
(Ivanie of Elimica Elability 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 m	natter to the following:					
MARYKE GUILD						
(Name of Person)						
PRUDENTIAL CRES COMMERCIAL REAL ESTATE - PROPERTY MANAGEMENT (Firm/Company)						
120 S. PALMETTO AVENUE	SECUTALL					
(Address)	RET. AHA					
	ARY SSI					
DAYTONA BEACH, FL 32114						
(City/State and Zip Code)	-ILED I-9 PN 12: 48 TARY OF STATE ASSEE, FLORIDA					
For further information concerning this matter, please call:						
MARYKE GUILD at (_	386) 253 8565					
(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	☐ \$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.	Nai	me of the limited liability company: CGC 8, LLC		
2.	(a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: 2801 TENAYA WAY, SUITE C LAS VEGAS, NV 89128	
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME	
4/2	28/0	В	M07000005565	
3.	Dat	te of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of		he records of the Florida Dept. of States		
		Registered Agent:	PARACORP INCORPORATED S	
		Registered Office Address:	236 EAST 6TH AVENUE TALLAHASEE, FL 32303	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			[0] 1	
		NEW Registered Agent:	MARYKE GUILD	
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	PRUDENTIAL CRES COMMERCIAL REAL ESTATE 120 S. PALMETTO AVENUE DAYTONA BEACH p,FL 32114	
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. (Signature of a member or authorized representative of a member)				
(P	rintec	RD DENN or typed name of signee)	· -	
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 dompany has been notified in writing of this change. (Signature of Registered Agent)				

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