m07000007214

Registered Agent Schickers	I-nc
(Requestors Name) 515 Congress Live (Address)	
Sti 2300	
S& 2300 (Address) AUSHI, TX 98701 (City/State/Zip/Phone #)	_'
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	:
Special Instructions to Filing Officer:	i i
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10 MAY -4 AM IO: 58
SECRETARY OF STATE
SECRETARY OF STATE

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. Name of the limited liability company:SOUTHE	ERN PALMS ASSOCIATES, LLC	
2. (a) Principal office address of limited liability company	<i>y</i> :	
(Note: MUST BE STREET ADDRESS)	8775 FOLSOM BLVD, STITE 250 SACRAMENTO CA 95826	
(b) Mailing address of limited liability company:	THAN SELECTION OF THE PROPERTY	
(Note: MAY BE POST OFFICE BOX)	same as above	
12/12/2007 3. Date of filing/registration in Florida	M070000072 55 4. Document number	
5. (a) Registered Agent and Registered Office shown on the	the records of the Florida Dept. of State:	
Registered Agent:	PEEK, SCOTT	
Registered Office Address:	1705 N 16TH STREET TAMPA FL 33605 US	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	REGISTERED AGENT SOLUTIONS, INC.	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	ST BE FLORIDA STREET ADDRESS) SUITE A	
	TALLAHASSEE ,FL 32301	
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		
CARL A. PANATTONI	_	
Printed or typed name of signee Lhoraby accept the appointment as registered agent and a	gree to act in this canacity. I further garee to	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the providing and I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address. I hereby confirm that the limited liability company	gree to det in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.	
Signature of Rigistered Agent SEAN PREWITT, ASST. SECRETARY		

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