

MO9000000015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

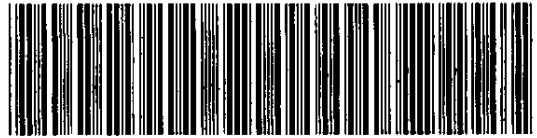
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 FEB 19 PM 12:16

T. HAMPTON  
FEB 22 2010  
EXAMINER

DUSS, KENNEY, SAFER, HAMPTON & JOOS, P.A.  
ATTORNEYS AT LAW

JOHN S. DUSS, IV  
THERESA M. KENNEY  
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February 18, 2010

**VIA UNITED STATES MAIL**

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

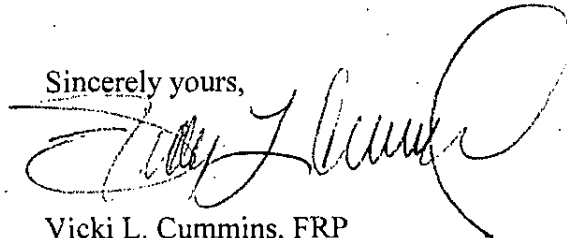
Re: Registered Agent Changes

Ladies and Gentlemen:

Enclosed please find fifteen (15) Statements of Change of Registered Office or Registered Agent for filing with your office. Also enclosed is this office's check payable to the Division of Corporations in the amount of \$445.00. Please return your confirmations of filing to our office at the above address.

Thank you for your assistance.

Sincerely yours,



Vicki L. Cummins, FRP  
Paralegal to John S. Duss, IV

:vlc  
Enclosure(s)

**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: Ponte Vedra (2008) Limited Liability Company

2. (a) Principal office address of limited liability company: \_\_\_\_\_



(Note: **MUST BE STREET ADDRESS**)

2644 Capitol Trail, Suite 300 Dept. 743  
Newark, Delaware 19711

(b) Mailing address of limited liability company: \_\_\_\_\_



(Note: **MAY BE POST OFFICE BOX**)

Same

12/31/2008

M09000000015

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

John S. Duss, IV

Registered Office Address:

3652 Crown Point Court  
Jacksonville, Florida 32257

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

John S. Duss, IV

**NEW** Registered Office Address:

**(MUST BE FLORIDA STREET ADDRESS)**

Duss, Kenney, Safer, Hampton & Joos  
4348 Southpoint Boulevard, Suite 101  
Jacksonville, FL 32216

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

John S. Duss, IV, Authorized Person

Printed 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 company 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

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