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## FISHER AND WILSEY, P.A.

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GEORGE F. WILSEY Board Certified Wills, Trusts and Estates; Certified Circuit Mediator

DAVID F. WILSEY

Telephone (727) 898-1181

Fax (727) 821-6681

December 4, 2002

STEVEN M. WILSEY Also Certified Public Accountant

<u>Of Counsel</u> ROBERT W. FISHER W. JOSEPH REYNOLDS



Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Re:

Windward Partners IX, LLC

Statement of Change of Registered Office, etc.

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company, concerning the change of registered agent for Windward Partners IX, LLC.

Our firm check in the amount of \$33.75 is also enclosed for the filing fee (\$25.00) and for a certified copy (\$8.75). Please return the certified copy to me at the above address.

Thank you for your assistance.

Sincerely,

DAVID F. WILSEY

DFW/jek
Enclosures
\2002\corporations\windward\sec state ltr 12.4.02

## 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. The name of the limited liab	ility company is: Windwe	d Partners IX, IJC	
2. The mailing address of the li	mited liability company is	: 15 South Main S	treet, Suite 900,
Greenville, SC 29601	• •		
12/10/98		м98000001488	
3. Date of filing/registration in Florida		4. Document numb	her ES _
	Corporation System Name O South Pine Island Address	ice address as shown on	三百万四
<u>Plar</u>	ntation, FL 33324 City, State and		± :
6. The name and address of the	new registered agent and/	or office:	
Dav		,	<i></i>
275	Name Fourth Street North	1	
<del></del>	ida street address (P.O. B		•
St.	Petersburg FL	33701	
	City, State and	Lip	
If the limited liability company is confirmed that after the change and the business office of the reliability company, it is hereby company, it is hereby company, it is hereby company is the members of the limited liability coperating agreement of the limited liability agreement of the limited liability and limited liability.	or changes are made, the ligistered agent will be ider on firmed that the change (so lity company or as otherwimited liability company.	Florida street address of tical. Or, in the case of s) was/were authorized	f the registered office f a Florida limited by an affirmative vote of
Signature of a member of authorized repr	escalative of a member)		
Arthur L. Howson, Jr. (Printed or typed name of signee)			
I hereby accept the appointmen comply with the provisions of all and I am familiar with and acceptage of this do address, I hereby confirm that the	t as registered agent and I statutes relative to the p pt the obligations of my p cument is being filed to m he limited liability compai	agree to act in this cape roper and complete per osition as registered ag erely reflect a change i ny has been notified in i	acity. I further agree to formance of my duties, sent as provided for in the registered office writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)

(Signature of Registered Agent)