

MAY. 19. 2010 3:44PM
Division of Corporations

TRENAM KEMKER

P03000040282

NO. 1222

P. 1 of 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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03-3504/NTC

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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REGISTERED AGENT CHANGE LITTLE ROCK MANAGEMENT, INC.

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EXAMINER

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Little Rock Management, Inc.
2. The principal office address: 5707 Clouds Peak Drive, Lutz, Florida, 33558
3. The mailing address (if different): 5707 Clouds Peak Drive, Lutz, Florida, 33558
4. Date of incorporation/qualification: 4/9/03 Document number: P03000040282
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Nelson T. Castellano101 E. Kennedy Boulevard, Suite 2700Tampa, Florida 33602

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Chris Cambas5707 Clouds Peak DriveP.O. Box NOT acceptableLutz, Florida 33558

10 MAY 19 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Chris Cambas
Signature of an officer or director

Lori Cambas, Manager
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Chris Cambas
Signature of Registered Agent

May 19, 2010
Date

If signing on behalf of an entity:

Chris Cambas
Typed or Printed Name

*** FILING FEE: \$35.80 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2B045 (8/05)

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