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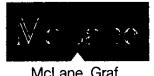
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RAChange Heuris 4-9-09

COVER LETTER

Division of Corporations		
SUBJECT: 82 Commercial Group, Inc. (Name of Corporation)	on) +	
DOCUMENT NUMBER: <u>P04000084627</u>		
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.	
Please return all correspondence concerning this matter to the fo	ollowing:	
John E. Hughes, (Name of Contact Per	Esq	
(Name of Contact Pers	son)	
McLane, Graf, Raulerson & Middletor (Firm/Company)	n, Professional Association	
(i iiii company)		
000 Fire Street, DO Box 226		
900 Elm Street, PO Box 326 (Address)		
Manchester, NH 03	105-0326	
Manchester, NH 03105-0326 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Aniko Rouley CP	603 \ 628-1443	
Aniko Bouley, CP at ((Name of Contact Person) (A	603) 628-1443 Area Code & Daytime Telephone Number)	
	0	
Enclosed is a \$35.00 check made payable to the Department of	State.	
·· · · · · ·	6	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
	rananassee, i'll 32301	



McLane, Graf, Raulerson & Middleton Professional Association

900 Elm Street | P.O. Box 326 | Manchester, NH 03105-0326 Tel: 603.625.6464 | Fax: 603.625.5650 | www.mclane.com OFFICES IN: MANCHESTER CONCORD PORTSMOUTH WOBURN, MA

Direct Dial: (603) 628-1443 Email: aniko.bouley@mclane.com

April 2, 2009

VIA CERTIFIED MAIL

Florida Department of State

Amendment Section

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Re: 82 Commercial Group, Inc. Doc#: P04000084627

Repco Development, Inc. Doc#: P04000034227

River Edge Plantation Company Doc#: P04000017502

- Statement of Change of Registered Office and Registered Agent

Dear Division of Corporations:

Enclosed please find a completed Statement of Change of Registered Office and Registered Agent for Corporations in the State of Florida for the above-referenced corporations. Also enclosed is a check in the amount of \$35.00 for the filing fee attached to each submission.

Please free to contact Attorney John Hughes at 603-628-1347 or me, should you have any questions or require any additional information regarding the enclosed filing. Thank you.

Very truly yours.

Anikó Bouley, CP (

Certified Paralegal Corporate Department

Enclosures

cc: John E. Hughes, Esq.

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: 82 Commercial Group, Inc.
2. The principal	office address: 1250 Galleon Drive, Naples, FL 33939
3. The mailing a	ddress (if different): same
4. Date of incorp	poration/qualification: 05/27/2004 Document number: P04000084627
	street address of the current registered agent and registered office on file with the trnent of State: (If resigned, enter resigned)
	Larry Legel
	800 W. Cypress Creek Road, Suite 465
	Fort Lauderdale, FL 33309
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Corporation Service Company
	1201 Hays Street (P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
(Signatu	William F. Hopkins, Jr., President (Printed or typed name and title)
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Sy Ca	mature of Refistered Agent) (Date)
If signing on be	half of an entity:
Lynn Can	nelongo, Assistant VP yped or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *