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COVER LETTER

Amendment Section Division of Corporation	ıs						
SUBJECT: Arcadia Village Development Company Name of Corporation							
		- F +					
DOCUMENT NUMBER:	P970	00106051					
The enclosed Statement of Char	nge of Registered Office	Agent and fee are submitt	ed for filing.				
Please return all correspondence concerning this matter to the following:							
	Ban India	2. Cabal					
Ms. Jody B. Gabel Name of Contact Person							
	ranic or con	tuot i bisoti					
Lutz, Bobo, Telfair, Eastman, Gabel & Lee							
Firm/Company							
2 North Tamiami Trail, Suite 500							
Address							
Sarasota, FL 34236							
City/State and Zip Code							
	" 1 101 1	L. L					
T	jbgabel@lutz	bobo.com	action				
E-mail address: (to be used for future annual report notification)							
For further information concern	ning this matter, please ca	all:					
Me Jody B	Cabel		051 1900				
Name of Contac	t Person	at (<u>877</u>) Area Code & Daytir	ne Telephone Number				
, , , , , , , , , , , , , , , , , , , ,							
Enclosed is a \$35.00 check made	de payable to the Departi	ment of State.					
<u>Mailin</u>	g Address: dment Section	Street Address: Amendment Se	ction				
• • • • • • • • • • • • • • • • • • • •		Amendment Se Division of Co					
	on of Corporations Box 6327	Clifton Buildin	•				
	assee, FL 32314	2661 Executive					
1 anan	1455CC, I'L 32314	Tallahassee, Fl					

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

Pursuant to the	provisions of sections 60	7.0502, 617.0502,	607.1508, or 617.1508, Flo	orida Statutes, this
•		•	ed under the laws of the Sta	7
in ord	ler to change its registered	office or registere	ed agent, or both, in the Sta	te of Florida.
i. The name of	the corporation: Arcad	ia Village De	velopment Compa	nv
	i		0, #532, Arcadia, FL 3	
				· · · · · · · · · · · · · · · · · · ·
3. The mailing	address (if different):			·
4. Date of inco	rporation/qualification:	12/17/97	Document number:	P97000106051
	nd street address of the cur artment of State: (If resign		nt and registered office on t	ile with the
	C. Neil Gregory			
	4001 Tamiami Trai	l North, Suite 4	104	
	Naples, FL 34103-	8702		
6. The name an (if changed):		v registered agent	(if changed) and /or register	ed office
	Lutz, Bobo, Telfair,	Eastman, Gal	oel & Lee	2000 SEI TALI
	2 North Tamiami T			2009 JUN 22 SECKETARY ALLAHASSE
	-	P.O. Box NOT a	cceptable	122 188
	Sarasota, FL 3423	6		
The street addr	ess of its registered office I be identical.	e and the street ac	ldress of the business offic	e of its registered agent
			by its board of directors or fied in writing of the chang	
Juck	Preeman		Ron Freer	nan, Sr.
I hereby accep I further agree of my duties, a document is be corporation ha	atte of an officer of director of the appointment as regi to comply with the provi nd I am familiar with and sing filed merely to reflec as been notified in writing	stered agent and sions of all statut I accept the oblig t a change in the g of this change.	rinted or typed man agree to act in this capacit es relative to the proper ar ation of my position as reg registered office address, l	
July	Stabel		06/17/200	9
	grature of Registered Agent		Date	
If signing on b	ehalf of an entity:			
	Jody B. Gabel Typed or Printed Name	· · · · · · · · · · · · · · · · · · ·		

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