# Z00160

976 Brevo Rockledge	ard Ave.5 2,F1.3391	xuite A		
(City/State/Zip/Phone #)				
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DIVILION OF CORFORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN JAN 8 2003

### Florida Legal Group, P.A.

#### Attorneys at Law

(407) 898-7075 (O) (407) 898-0292 (Fax) Email: <u>bidavis@worldramp.net</u>

Mailing Address: P.O. Box 1058 Orlando, FL 32802-1058 Street Address: 538 Virginia Drive Orlando, FL 32803

December 19, 2002

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

Re: Otter Trace, LC; Document No. Z00160

#### Dear Sir/Madam:

Enclosed for filing please find the following:

- 1. Articles of Amendment of Otter Trace, L.C.
- 2. Resignation of Registered Agent for a Limited Liability Company and corresponding Transmittal Letter;
- 3. Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company; and
- 4. Check no. 2124 in the amount of \$135.00 for the required filing fees for nos. 1, 2 and 3 above (\$25.00, \$85.00, and \$25.00 respectively).

Thank you.

Very truly yours,

Cat L. Brower

Paralegal/Administrator

:cb Enclosures

## 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 limit	ed liability company is: Ot	ter Trace, L.C.		
	f the limited liability compa		nue, Suite A	
Rockledge, FL 32955				
December 19, 1989		Z00160	Z00160	
3. Date of filing/registration in Florida		4. Document num	nber	
5. The name of the registe Florida Department of	ered agent and the registered State: Dewey L. Harris	l office address as shown o	on the records of the	
	Nai 976 Brevard Avenue, S	uite A	DINAME DI	
	Add Rockledge, FL 32955 City, State		FILED 9: 38 2002 DEC 23 M 9: 38 DIVAJON OF CORPORATION DIVAJON OF CORPORATION	
6. The name and address	of the new registered agent	and/or office:	灣宝口	
	Bradley J. Davis, Esqui	re	FL 95 34	
	538 Virginia Drive Name	2	SON SON	
	Florida street address (P.0	). Box NOT acceptable)		
	Orlando, FL 32803 FL	,		
	City, State a	and Zip		
confirmed that after the ch and the business office of liability company, it is her	ipany is not organized under lange or changes are made, the registered agent will be eby confirmed that the chan d liability company or as off f the limited liability compa	the Florida street address of identical. Or, in the case of the ca	of the registered office of a Florida limited by an affirmative vote of	
Signature of a member or authori	zed representative of a member)	* * .		
(Printed or typed name of signee)	HOFF			
	ntment as registered agent of sof all statutes relative to the decept the obligations of new document is being filed that the limited liability con	ind agree to act in this cap ie proper and complete per iy position as registered as o merely reflect a change in apany has been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.	

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

INHS18(10/99)

**FILING FEE: \$25.00**