Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H080001333603)))



H060001333603ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

08 MAY 20 AM 8: 00

RY OF STATI

Division of Corporations

Fax Number

: (850)617-6380

n:

Account Name : C T CORPORAT: Account Number : FCA000000023

: C T CORPORATION SYSTEM

Account N

: (850)222-1092

Fax Number

: (850)878-5926

REGISTERED AGENT CHANGE

WILDER RICHMAN MANAGEMENT CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	. 02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

statement of	change is submitted)	for a corporation organ	2, 607.1508, or 617.1508, Florida Statute ized under the lows of the State of Florid	9
in o	rder to change its re	gistered office or registe	ered agent, or both, in the State of Florida	
1. The name	of the corporation; V	Vilder Richman Manage	ment Corporation	
2. The princi	pal office address; The	e Richman Group of Co	mpanies, 340 Pemberwick Road, Greenwk	th, Connecticut 968
3. The mailin	ng address (if differer	ıt):		
4. Date of inc	corporation/qualifica	tion: July 16, 1993	Document number: F9300000334	5
	and street address of spartment of State:	the current registered a	gent and registered office on file with the	
	Jay Sakalo c/c	8)Izin Sumberg Du	nn Baena Price & Axelrod LLP	·
	200 South Biscayne Blvd., Suite 2500		e 2500)8 <u>3</u>
	Mlami	Florida	33131	2 14
6. The name (if change		the new registered ages	nt (if changed) and /or registered office	08 MAY 20 AM 10: 5
	The Brandy580_Villag	Miller, c/o Wi wine Centre I te Blvd Suitan Beach Polision	lder <u>Ri</u> chman Managament Com	rp.
Such change authorized b	yes futhorized by the control or an orner	resolution duly adopte corporation has been no	address of the business office of its region of the business office of its region of the business of the an office of the change. Brian P. Myers, President (Prima or typed some and the) and agree to act in this capacity, that is relative to the proper and complete	er so
If signing or	Kristi Windows of Registered A n-behalf of an entity uman Group of B	n M. Miller	nd agree to act in this capacity. Tutes relative to the proper and complete ligation of my position as registered age is registered office address, I hereby co. 5/15/08 (Date)	nt. Or, y inte nfirm that the
	(Typed or Printed Name)		

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

MAKE CHECKS PAYABLE TO PLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CH2E045 (8/05)