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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. Name of the limited liability company: 472 FE | KNWOOD ROAD, LLC |
|--|---|
| 2. (a) Principal office address of limited liability company | y: |
| (Note: MUST BE STREET ADDRESS) | KBY BISCAYNE, FL. 33149 |
| (b) Mailing address of limited liability company: | |
| (Note: MAY BE POST OFFICE BOX) | SAME 45 ABOVE |
| 7-19-2010 | 410000075824 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Registered Agent and Registered Office shown on | the records of the Florida Dept, of State: |
| Registered Agent: | CLANTIO RIVERA, ESS. |
| Registered Office Address: | 4000 Pance DE LEON Bluel |
| | Corne GANGS, FL. BOIKS |
| (b) Enter name of NEW Registered Agent and/or NE | W Registered Office address: |
| NEW Registered Agent: | FERNANDO REDONDO |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 1121 CRANDON Blud #E400 Key BISCAYNE ,FL 33149 |
| If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company. Frinted or typed name of signee I hereby account the appointment as registered agent and a comply with the provisions of all statutes relative to the proving am familial with and accept the obligations of my portagine to the province of the confirming that the limited liability company signature registered Agent Division of Corporations, P.O. Box 63. | lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization of the provided in the articles of organization of the provided in the articles of organization of the provided in this capacity of the provided for in rely reflect a change in the registered office of has been notified in writing of this change. |
| Division of Corporations, P.O. Box 63 FILING FEE: \$2 | |

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