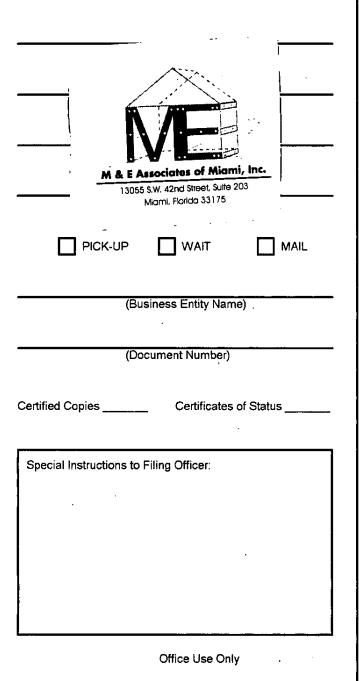
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SECRETARY OF STATE
FALLAHASSEE, FLORID,

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Leeward Isles Homeowners Association,
2. The principal office address: Clo M+E Associates of miamin Loc.
13055 GU 42 Street, Swife 203, Migmi 33175
3. The mailing address (if different):
4. Date of incorporation/qualification: 11.28.05 Document number: NOSDO0011934
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
SKRLD, doc.
201 Alhambra Circle, Suite 1102 5 5 5 7
Coeal Gables, FL 33134
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed);
Association Law Group Pl
1666 Kennedy Causeway Svite 305 (PO. Box NOT acceptable)
Miami Beach. FL 33141
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Me. 1550 Diaz - Property Manager (Signature of air officeror director) (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent)  9/10/07 (Date)
If signing on behalf of an entity:
DAVID C- ARNOLD (Typed or Printed Name)

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