A97000025741

Florida Department of State
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REGISTERED AGENT CHANGE

TOWN SQUARE AT SAINT JOHNS LIMITED

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EXAMINER

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Town Square at Saint Johns Limited
Name of Limited Liability Company

DOCUMENT NUMBER: A97000002541

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel B. Nunn, Jr., Attorney
Name of Person

Fowler White Boggs P.A.
Name of Firm/Company

50 N. Laura Street, Suite 2800
Address

Jacksonville, FL 32202
City/State and Zip Code

daniel.nunn@fowlerwhite.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Daniel B. Nunn, Jr., Attorney at (904) 598-3118
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for $85.00 for an active limited liability company or $25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Town Square at Saint Johns Limited
Name of Limited Partnership or Limited Liability Limited Partnership

2. 11/20/1997
Date of filing/registration in Florida

3. A97000002541
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Dennis A. Foster
Name

9995 Gate Parkway N., Suite 400
Address

Jacksonville, FL 32246
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Daniel B. Nunn, Jr.
Name

50 N. Laura Street, Suite 2800
Florida street address (P.O. Box not acceptable)

Jacksonville FL 32202
City, State and Zip

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6. Such change(s) is/are effective when filed by the Florida Department of State.

Nick T. Kavalieros, Pres.
Signature of General Partner AVENTURA/TOWN SQUARE, INC.

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 obligations of my position as registered agent.

Signature of Registered Agent

Filing Fee: $35.00
Certified Copy (optional): $52.50