224493

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Lennar Realty, Inc.		
		
		
		
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() Profit	() Amendment	() Merger
() Nonprofit	() I mortainem	() Merger
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark
() Limited Partnership	() Annual Report	() Other
()LLC =	- () Name Registration	(x) Change of RA
() 0-4:6-10	() Fictitious Name	() UCC
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850-222-1092

CT Corporation System 660 E. Jefferson St., Tallahassee, FL, 32301



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

	- •	•	.0502, 607.1508, or 617.1508,	•
Florida	-		organized under the laws of the d office or registered agent, or	•
of Florida.	in order :	change is registered	a office or registered agent, or	oom, in the state
•	the corporation:	Lennar Realty, Inc.		
	l office address:_	 		
				\$ 84 · ·
700 N.W. 107	th Avenue, Miami,	L 33172	· · · · · · · · · · · · · · · · · · ·	
3. The mailing	address (if differe	nt):	*·	
			AS PS	SEE SEE
4. Date of incom	rporation/qualific	tion: 6/4/1959	Document number: 224	
	d street address ourtment of State:	f the current registered	l agent and registered office on f	SE N
		Benjamin P. Butte	rfield, Esq.	
		700 N.W. 107th Ave.	nue, 4th Floor	_ ,
		Miami, FL 3	3172	- . -
6. The name as changed):	nd street address	of the new registered	agent (if changed) and /or reg	sistered office (if
		C T Corporation	1 System	
		c/o C T Corporati	on System	• ,
,		(P.O. Box or personal mailbox	-	_
	1200	South Pine Island Road, P	lantation, Florida 33324	_
The street addreagent, as chang	ess of its registere ed will be identic	d office and the stree al.	t address of the business office	of its registered
Such change was authorized by the	as authorized by he board, or the o	esolution duly adopte orporation has been n	ed by its board of directors or by otified in writing of the change.	y an officer so
. •	, chairman or vice chairn		. Chart, an Man! (Printed or typed name and title)	
perjormance of registered agen office address,	my duties, and I it. Or, if this doc I hereby confirm	am jamiliar with and iment is being filed m	nd agree to act in this capacity, tutes relative to the proper and accept the obligation of my pos erely to reflect a change in the has been notified in writing of th	sition as registered
By:	Corporation System		in line land	
	lignature of Registered	ent)	(Date)	
If signing on behal	f of an entity:	CONNIE BRYAN SPECIAL ARSISTAN	IT SECRETARY	
	Typed or Printed Name)		(Capacity)	

* * * FILING FEE; \$35.00 * * *