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SHANELL M. HATTON

FILE NO. 1V98-003

February 12, 1998

Secretary of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

500002431535--5 -02/16/98--01081--021 \*\*\*\*\*\*70.00 \*\*\*\*\*\*35.00

RE: Change of Registered Agent

Dear Sir or Madam:

Enclosed please find the Statement of change of Reconstants

Cove General, Inc. Cove Club Management, Inc.

Also, enclosed is our check for \$70.00, representing the filing fee. Kindly file and return confirmation back to up in the stamped, self-addressed envelope provided for your convenience.

If you need anything further please feel free to contact us.

Very truly yours,

Linda Jo Brooks,

Légal Assistant to Mr. Welch

/ljb

Encl

\* TEL FEB 1 6 1998

Charter No.	545896	
Date Filed	9/22/77	

## STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1.	The name of the corporation is:COVE CLUB MANAGEMENT, INC.	
2.	The name and address of its present registered agent is:	٠, ١٥
	CHARLES C. CROSSWHITE 1400 COUNTRY CLUB DRIVE BOCA RATON, FL 33428	FILE SECRETARY SECRETARY
3.	The name and street address to which its registered agent is to be changed is: (P.O. BOX NOT ACCEPTABLE)	OF STA
	DAVID D. WELCH	<u> </u>
	2401 E. ATLANTIC BOULEVARD SUITE 400	
	POMPANO BEACH, FL 33062	
A .	The atmost address of its registered office and the atmost address of the business	- CC: C :

- 4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.
- 5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

Signature

(President or:Vice President)

Date

1/6/98

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 UNDER SECTION 607.0505, FLORIDA STATUTES.

Please Print/Type Name	DAVID D. WELCH
Signature	TD)/16×
Date 1/6/98	(Agent)
Date	

FILING FEE \$35