

A06000000509

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EXAMINER



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CORPORATION SERVICE COMPANY

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ACCOUNT NO. : I20000000195

REFERENCE : 787391 7394549

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : May 23, 2011

ORDER TIME : 9:24 AM

ORDER NO. : 787391-094

CUSTOMER NO: 7394549

CHANGE OF AGENT

NAME: HUNTINGTON AT SUNDANCE OWNER,
LP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER: _____

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

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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. HUNTINGTON AT SUNDANCE OWNER, LP

Name of Limited Partnership or Limited Liability Limited Partnership

2. 04/12/2006

Date of filing/registration in Florida

3. A06000000509

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:

C T Corporation System

Name

1200 South Pine Island Road

Address

Plantation, FL 33324

City, State and Zip

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

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box not acceptable)

Tallahassee FL 32301

City, State and Zip

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

Maureen Cathell

Signature of General Partner

Maureen Cathell, VP on behalf of Huntington At Sundance GP, LLC, general partner

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.

Corporation Service Company

By:

Signature of Registered Agent Grace E. Kirby, Asst. VP

Filing Fee: \$35.00

Certified Copy (optional): \$52.50