

06/22/2007 12:30

850-245-6897

FL DEPT OF STATE

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To: Florida Dept. of State  
Subject: 001448.70423.14

From: Ashley Smith

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**A9600000336**

Florida Department of State  
Division of Corporations  
Public Access System

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To: Division of Corporations  
Fax Number : (850)205-0380

From: Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850)222-1173  
Fax Number : (850)224-1640

2007 JUN 25 A 8:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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001448.70423.14

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DIVISION OF CORPORATIONS

**REGISTERED AGENT CHANGE**

**IGCH VILLAGER ASSOCIATES, LTD.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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Corporate Filing Menu

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To: Florida Dept. of State  
Subject: 001448.70423.15

From: Ashley Smith

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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. IGCH Villager Associates, Ltd.

Name of Limited Partnership or Limited Liability Limited Partnership

2. 2/19/1996

Date of filing/registration in Florida

3. A96000000336

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:

CT Corporation System

Name

1200 S. Pine Island Road

Address

Plantation, FL

City, State and Zip

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

NRAI Services, Inc.

Name

2731 Executive Park Drive, Suite 4

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

Weston

FL 33331

City, State and Zip

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

*Sandra J. Lantz*  
Signature of 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.*

*Sandra J. Lantz*  
by: Sandra J. Lantz  
Signature of Registered Agent

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

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