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(City/State/Zip/Phone #)

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J. BRYAN

OCT 22 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Grand Rivage of Brandon Lakes, Ltd.
(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: _____

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Siobhan O'Donnell, Esquire

(Contact Person)

Klehr, Harrison, Harvey, Branzburg & Ellers LLP

(Firm/Company)

260 South Broad Street

(Address)

Philadelphia, PA 19102-5003

(City, State and Zip Code)

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For further information concerning this matter, please call:

Siobhan O'Donnell at (215) 569-3022

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

INHS04 (01/06)

**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. The Grand Rivage at Brandon Lakes, Ltd.

Name of Limited Partnership or Limited Liability Limited Partnership

2. October 17, 2008

Date of filing/registration in Florida

3. _____

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:

Sybil C. Field

Name

6763 SW 88th Street

Address

Miami, FL 33156

City, State and Zip

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

W. Bradley Munroe, Esquire

Name

239 East Virginia 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.

signature page attached hereto

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.

W. B. Munroe
Signature of Registered Agent

Filing Fee: \$55.00


Certified Copy (optional): \$52.50

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RIVAGE GP, LLC,
a Florida limited liability company

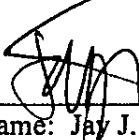
By: LEM Funding XX, L.P.
a Delaware limited partnership,
one of its members

By: LEM Funding XX GP, LLC,
a Delaware limited liability company,
its General Partner

By: 
Name: Jay J. Eisner
Title: President

By: LEM Parallel XX, L.P.
a Delaware limited partnership,
one of its members

By: LEM Parallel XX GP, LLC,
a Delaware limited liability company,
its General Partner

By: 
Name: Jay J. Eisner
Title: President

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