2001 UNIFORM BUSINESS REPORT (UBR) Apr 14, 2001 8:00 am Secretary of State **DOCUMENT # J97612** 1. Entity Name LEVITT AT AMHERST, INC. 04-14-2001 90011 046 ***150.00 Mailing Address Principal Place of Business % LEVITT HOMES INCORPORATED % LEVITT HOMES INCORPORATED 7777 GLADES ROAD. SUITE 410 7777 GLADES ROAD, SUITE 410 **BOCA RATON FL 33434 BOCA RATON FL 33434** 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0063469 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST. TALLAHASSEE FL 32301 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. Change ☐ Addition VSTD ERY ☐ Delete TITLE TITLE NAME HOYOS, JEFFREY NAME STREET ADDRESS STREET ADDRESS 7777 GLADES RD #410 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** ☐ Addition Change ☐ Delete TITI F NAME WIENER, ELLIOTT M NAME STREET ADDRESS STREET ADDRESS 7777 GLADES RD #410 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** Change Addition VSD Delete TITLE NAME WEST, ALFRED G NAME STREET ADDRESS STREET ADDRESS 7777 GLADES RD #410 CITY-ST-7IP CITY-ST-ZIP **BOCA RATON FL** Change ☐ Addition Delete TITLE TITLE SLEEK, HARRY T NAME NAME STREET ADDRESS STREET ADDRESS 7777 GLADES RD #410 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** □ Change ☐ Addition TITLE ☐ Delete TITLE DAMIANO, TOM NAME NAME STREET ADDRESS STREET ADDRESS 7777 GLADES RD #410 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** Change ☐ Addition ☐ Delete TITLE TITLE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or tristee amproved to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an addre ith all other like empowered.

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-7IP

ARMSTRONG, JOEL

7777 GLADES RD #410

BOCA RATON FL 33434

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OF