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811 Dallas Avenue Suite 1500 Houston, TX 77002 Tel. 713 658 9486 Fax 713 658 9720

June 13, 2000

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

Re: Homevest, L.L.C. Order #: 2236167

Dear Sir or Madam:

As requested by counsel, we enclose for filing Statement of Change of Registered Office or Registered Agent on behalf of the above named corporation, together with the funds in payment of the required fees. This document should be filed upon receipt.

Evidence of the filing should be returned to my attention via regular mail.

If you have any questions or if for any reason the filing cannot be effected, please notify this office of the details by calling our toll-free number: 800-324-0754

Very truly yours,

Denise Bell

Customer Specialist

Enclosure(s)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agent, or both, in the blace of x to state.	
1. The name of the minica habitity company as	ST, L.L.C.
2. The mailing address of the limited liability company is: 1241	Semoran Bīvd., Suite 185
Cass	selberry, Florida 32/0/
<del></del> -	
	0000002565
3. Date of filing/registration in Florida 4. D	Occument number
5. The name of the registered agent and the registered office addre	ess as shown on the records of the
Florida Department of State:	
Walter D. Beeman, Jr. Name	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
1241 Semoran Blvd., Suite 189	5
Address	
Casselberry, Florida 32707 City, State and Zip	
City, State and Zip	
6. The name and address of the new registered agent and/or office	FIL JUN 16
O. The number and desired to	ASS TO THE
CT Corporation System	SEP PA
Name	유 로 그
1200 South Pine Island Road	
Florida street address (P.O. Box NOT	acceptable)
Plantation, FL 333	324
Plantation, FL 333 City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  (Signature of a member or authorized representative of a member) Richard G. Slaughter, Secretary and Vice President	
- Ell C Home Compountion Manager of Homevest     (	
(Deinted or typed name of signee)	
I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper an and I am familiar with and accept the obligations of my position of Chapter 608, F.S. Or, if this document is being filed to merely readdress, I hereby couffirm that the limited liability company has be	o act in this capacity. I further agree to nd complete performance of my duties, as registered agent as provided for in eflect a change in the registered office been notified in writing of this change.
Visita TORCEN VICTOR ALFANO_	
(Signature of Registered Agent)  ASSISTANT SECRETARY	
Division of Corporations, P.O. Box 6327, Ta	illanassee, FL 32314

**FILING FEE: \$25.00**