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KIRK T. BAUER STEPHEN J. BRAUN A Professional Association

POST OFFICE BOX 459 223 SOUTH WOODLAND BOULEVARD DeLAND, FLORIDA 32721-0459

www.delandattorneys.com

TELEPHONE: (386) 734-3313 FAX: (386) 738-0424

E MAIL: kbauer@delandattomeys.com

October 21, 2004

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

Attention: Amendment Section

RE: Brandywine Oaks Development, LLC

Dear Sir or Madam:

Enclosed please find an original and a copy of the Resignation of Member, Managing Member or Manager and the Statement of Change of Registered Office or Registered Agent or Both for Brandywine Oaks Development, LLC changing their corporate agent to Kirk T. Bauer, Esquire. I have enclosed a check in the amount of \$50.00 in payment of your fee.

Please file this Statement and provide us with the date this change in Registered Agent was approved. Thank you for your assistance in this matter. Should you have any questions, please contact me at your convenience.

Sincerely,

BAUER/& ASSOCIATES ornéys at Law, P.A.

KTB:mh Enclosure

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.

1. The name of the limite	ed liability company is:	BRANDYWINE OAKS DE	EVELOPI	MENT, L	.LC.	<u>_</u> ,
2. The mailing address o	f the limited liability co	ompany is : P.O. Box 459, D	eLand, F	L 32721	1-0459	<u>)</u> .
						<u> </u>
	_ <u></u> _	L000000387				
3. Date of filing/registrat	ion in Florida	4. Document nu	mber			
5. The name of the registe Florida Department of	ered agent and the regis State: Michael A. Pyle	stered office address as shown	on the rec	ords of th	ne	
		Name Ridgewood Ave. Ste. D				
	Daytona Beach, FL		_			
	City,	, State and Zip	_			
6. The name and address	of the new registered a	gent and/or office:		Z H	즱	
	Kirk T. Bauer, Esquire			¥ S	04,007,22	
	Name 223 S. Woodland Boulevard		-	ASSEE	??	
	Florida street address (P.O. Box NOT acceptable)			<u> </u>		C
	DeLand,	_{FL} 32720				
	City, S	State and Zip	•	≯"	1	
If the limited liability conconfirmed that after the cand the business office of liability company, it is he the members of the limite the operating agreement of	npany is not organized hange or changes are method the registered agent whereby confirmed that the deliability company or of the limited liability company or the liability	under the laws of the State of made, the Florida street address ill be identical. Or, in the case change(s) was/were authorize as otherwise provided in the acompany.	Florida, it of the rege of a Floried by an atticles of c	is hereby sistered o da limite ffirmative organizati	, ffice d vote ion or	of
(Signature of a member or author	ized representative of a memb	per)				
Edwin W. Peck, Jr., M	GR 🗸					
(Printed or typed name of signee)			*			
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address I hereby confirm	intment as registered a is of all statutes relativ d accept the obligation his document is being that the limited liabili	gent and agree to act in this co to the proper and complete p as of my position as registered filed to merely reflect a chang ty company has been notified i	apacity. I performant agent as p e in the re n writing	further a ce of my a provided gistered a of this ch	gree to duties, for in office lange.)

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

FILING FEE: \$25.00

INHS18(10/99)

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		- , - : , , , , , , , , , , , , , , , , 	L00000003877	,			_•
3. Date of filing/registration in F	lorida	$\overline{4}$. Document num	ber			_
5. The name of the registered age Florida Department of State:	nt and the regist ael A. Pyle	tered office ad	dress as shown or	1 the recor	rds of th	ne	
	W. Granada R	Name Ridgewood Av Address	ve. Ste. D	T			
Dayto	na Beach, FL			3	 ∑	Ŧ	
	• •	State and Zip		1		000	
6. The name and address of the no	ew registered ag	gent and/or off	īce:		蒸	2	
Kirk T	. Bauer, Esqu	ire			HO HO	; ·	TILE
223 S	Name 223 S. Woodland Boulevard			ELON F SHA	(UL DCT 22 AM 8: 17	<u> </u>	
Florid	la street address	(P.O. Box NO	OT acceptable)		見記		
DeLar		_{FL} 32720					
	City, St	tate and Zip					
If the limited liability company is confirmed that after the change or and the business office of the regiliability company, it is hereby con the members of the limited liability the operating agreement of the limited liability.	changes are ma stered agent wil firmed that the	ade, the Florid Il be identical. change(s) was	a street address of Or, in the case of were authorized	f the regist f a Florida bv an affir	tered of a limited rmative	ffice d vote c	of
(Signature of a member or authorized repres	entative of a member	r)					
Edwin W. Peck, Jr., MGR							
(Printed or typed name of signee)			r w	=			
I hereby accept the appointment of comply with the provisions of all sand I am familiar with and accept Chapter 608, F.S. Or, if this docu address, I haveby confirm that the	as registered ag statutes relative the obligations ment is being fi limited liability	tent and agree to the proper t of my position tiled to merely v company has	to act in this cape and complete per n as registered ag reflect a change i been notified in v	acity. I fu formance ent as pro n the regis writing of	rther as of my a wided f stered a this ch	gree to luties, for in office ange.	,

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

INHS18(10/99)

(Signature of Registered Agent)

FILING FEE: \$25.00