CT CORPORATION SYSTEM

CORPORATION(S) NAME

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Sweeting Associates, LLC

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() Profit () Nonprofit	() Amendment	() Merger	
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark	
() Limited Partnership () LLC	 () Annual Report () Name Registration () Fictitious Name 	() Other \overrightarrow{a} \overrightarrow{a} (X) Change of RA () UCC	
() Certified Copy	() Photocopies	() CUS	
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up	•
Name Availability Document Examiner Updater Verifier W.P. Verifier	5/15/01	Order#: 4331324 700004218307 2 -05/15/0101061020 Ref#: *****25.00 *****25.00 Amount: \$	
660 East Jefferson Stre Tallahassee, FL 32301	pet .	G C	5-01

Tel. 850 222 1092 Fax 850 222 7615

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 limited liability company is:

SWEETING ASSOCIATES, LLC.

2. The mailing address of the limited liability company is:

100 S. E. 2ND STREET, 13TH FLOOR MIAMI, FLORIDA 33131

3. Date of filing/registration in Florida: AUGUST 21, 2000

4. Document number: L00000010019

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

LYNN C. WASHINGTON 701 BRICKELL AVENUE, SUITE 3000 MIAMI, FLORIDA 33131

6. The name and address of the new registered agent and/or office:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FLORIDA 33324 OI MAY 15 PH 3: 36 SECRETARY OF STATE FALLAHASSEE, FLORIDA

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.

Gonzalo DeRamon, Vice President of Banc of America Community Development Corporation, Manager of Sweeting Associates, LLC

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

JOAN BOLDEN A. (Signature of Registered Agent)

ASSISTANT SECRETARY

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

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