601000003796

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Buchanan Ingersoll

ALIORNEYS

Cynthia J. Sargent Legal Assistant 813 222 8182 sargentcj@bipc.com SunTrust Financial Centre 401 E. Jackson Street, Suite 2500 Tampa, FL 33602-5236

T 813 222 8180 F 813 222 8189

www.buchananingersoll.com

July 26, 2005

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Re:

Generation Housing, LLC Document No. L01000003796

Dear Sir/Madam:

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Cynthia J. Sargent Buchanan Ingersoll PC 401 E. Jackson Street Suite 2500 Tampa, Florida 33602

For further information concerning this matter, please call me at (813) 222-8182.

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

Very truly yours,

Cynthia J. Sargent

CJS/

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.

1. The name of the limite	d liability company is	Generat	ion Housing, LLC		
2. The mailing address of				ıe	
Tampa, Florida 33614					
March 12, 2001			L01000003796		
3. Date of filing/registration in Florida			4. Document number		
5. The name of the registe Florida Department of S	red agent and the registate: James W. Goodwi		address as shown on t	he records of the	
	400 North Tampa	Name Street, Suit	e 2300		
	Tampa, Florida 33	Address			
6. The name and address of	of the new registered a	igent and/or	office:		
	Mark J. Bernet as i	Receiver fo	r Generation Ho	<u> </u>	
	401 E. Jackson Str	Name reet, Suite 2	2500		
-	Florida street addres	ss (P.O. Box	NOT acceptable)		
	Tampa,	_FL_3360	2		
•	City, S	State and Zip	•		
If the limited liability componitive that after the chand the business office of the liability company, it is here the members of the limited the operating agreement of	ange or changes are mains and characteristics are mains are made in the confirmed that the	nade, the Flo ill be identic change(s) v	rida street address of that. Or, in the case of a vas/were authorized by	ne registered office Florida limited an affirmative vote of	
(Signature of a member or authoriz	ed representative of a member	er)			
Mark J. Bernet					
(Printed or typed name of signee)					
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm to	of all statutes relative accept the obligation is document is being just the limited liability	gent and agr e to the prop is of my posit filed to mere ty company f	ree to act in this capaci er and complete perfoi tion as registered agen ly reflect a change in t ias been notified in wri	ty. I further agree to mance of my duties, t as provided for in he registered office iting of this change.	
(Signature of Registered Agent)	~~/				

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