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DIVISION OF CONPORATIONS
OF SEP 12 PH 4: 07

Blumenfeld Kaplan Sandweiss, P.C.

168 North Meramec Aven-Saint Louis, Missouri 6316 tel 314.863.0800 · fax 314.863.938 3201 South Providence · Suite 16 Columbia, Missouri 6526 tel 573.234.086 www.bks-law.co

September 9, 2005

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

Re: Registered Agent/Address Changes

Dear Sir/Madam:

Enclosed are three (3) corporate Registered Agent/Address changes and nine (9) limited liability company Registered Agent/Address changes, and the corresponding fees totaling \$330.00 as required. Please make the appropriate changes and provide me with evidence of the same at your earliest convenience.

Thank you for your assistance. Please let me know if you have any questions or need additional information regarding the enclosed.

Sincerely,

Harlon D. Keel

Paralegal

/hk Enclosures

cc: Harold A. Tzinberg, Esq.

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:	Baldridge-Naple	s II, L.L.C.	
2. The mailing address of the				,
11825 Manchester Road	_			
6/25/2002		L020	000004496	
3. Date of filing/registration in Florida		4. Do	cument number	
	ate: Burton Kann 10208 N. W. 24th Pl	Name ace, Apt. 405	as shown on the recor	
		State and Zip		OS S
6. The name and address of	the new registered ag	ent and/or office:		SECRETARY 05 SEP 12
ŀ	Kelly Price			7 CO
. 1	27200 Riverview Ce Florida street address Sonita Springs City, St			PH 4: 07
If the limited liability compacentismed that after the char and the business office of the liability company, it is hereby the members of the limited the operating agreement of the operation	nge or changes are made registered agent will by confirmed that the diability company or a he limited liability confirmed that the diability confirmed liability confirmed liability confirmed that the diability confirmed the limited liability confirmed the liabil	de, the Florida stre be identical. Or, change(s) was/were s otherwise provide mpany.	eet address of the regis in the case of a Florida e authorized by an affi ed in the articles of org	stered office a limited irmative vote of ganization or

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

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FILING FEE: \$25.00