From: FAXmaker

To: Division of Corporations

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Division of Corporations

Fax Number : (850) 205-0380

From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.

Account Number : I20010000025 Phone : (305) 935-3500

Fax Number : (305) 935-9042

REGISTERED AGENT CHANGE

CENTERLINE ACQUISITIONS, LLC

SA SHOW OF CHAPPERATION

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To: Division of Corporations

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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: CENTERLINE ACQUISITIONS, LLC.
2. The mailing address of the limited liability company is:
825 CORAL RIDGE DRIVE, CORAL SPRINGS FL 33071
02/27/2002 L02000004798
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
KIPNIS TESCHER LIPPMAN & VALINSKY, P.A.
100 NORTHEAST THIRD AVE. SUITE 610 Address
FT. LAUDERDALE FL 33301 City, State and Zip
6. The name and address of the new registered egent and/or office:
Leopold, Korn & Leopold, P.A.
Leopold, Korn & Leopold, P.A. Name 20801 Biscayne Blvd., Suite 501
20801 Biscayne Blvd., Suite 501 프트 설
Florida street address (P.O. Box NOT acceptable)
Aventura, FL 33180 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)
Craig Perry, President (Printed or typed name of signee)
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.
(Signature of Registered Agent) (Division of Corporations, P.O. Box 6327, Tailahassaa, FT, 32314

FILING FEE: \$25.00

INHS18 (8/05)