L02000008641

From: SUSAN G. WHITLATCH (904)301-4460 THE ST. JOE COMPANY 245 Riverside Avenue Suite 500 JACKSONVILLE, FL, 32202				
(City/State/Zip/Phone #)				
(Oit)/Outo/Lips 10/10//				
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J. BRYAN OCT 2 3 2003

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: MILLENIA PARK ONE, L.L.C.				
2. The mailing address of the limited liability company is:				
245 RIVERSIDE AVENUE SUITE 500, JACKSONVILLE, FL 32202				
2/11/2002		L02000008641	_ <u></u>	
3. Date of filing/registrati	on 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:				
	LAWRENCE PAINE			
، ،	245 RIVERSIDE AVE	Name ENUE SUITE 500	¥ ~	
		ddress	2 83	
	JACKSONVILLE, FL	tate and Zip	FI 2003 OCT	
o. The name and address t			88 3 8	
	CHRISTINE M. MAR		四兒 6	
	IN2	ume	PM 3: 44 PM 3: 44 PM 3: 44 PM 3: 44	
	Florida street address (P.O. Box NOT acceptable)	A.	
		FL		
	City, Sta	te and Zip		
If the limited liability come confirmed that after the cland the business office of liability company, it is her the members of the limite the operating agreement of Signature of a member or author (Signature of a member or author (Printed or typed name of signce)	the registered agent will reby confirmed that the cld liability company or as of the limited liability conjugate of a member)	der the laws of the State of Florile, the Florida street address of the identical. Or, in the case of thange(s) was/were authorized by otherwise provided in the article apany.	rida, it is hereby the registered office a Florida limited y an affirmative vote of les of organization or	
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or, if the address, I hereby confirm (Signature of Registered Agent)	intment as registered age is of all statutes relative to d accept the obligations this document is being fill that the limited liability	nt and agree to act in this capay o the proper and complete perfo of my position as registered age ed to merely reflect a change in company has been notified in w	city. I further agree to ormance of my duties, nt as provided for in the registered office riting of this change.	

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

INHS18(10/99)

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