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Division of Corporations Public Access System

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To:

Division of Corporations

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

REGISTERED AGENT CHANGE

BLACK CREEK BUILDERS GROUP, LLC

| Certificate of Status | O The second of |
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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:

BLACK CREEK BUILDERS GROUP. LLC

| _ | · | | | |
|----------|---|---|--|--|
| 1. | 1. The name of the limited liability company is: BLAC | K CREEK BUILDERS GROUP, LLC | | |
| 2. | The mailing address of the limited liability company is: 717 Ponce De Leon Blvd. Suite 230. | | | |
| | Coral Gables, FL 33134 | · · · · · · · · · · · · · · · · · · · | | |
| 10/11/02 | | 102000027053 | | |
| 3. | 3. Date of filing/registration in Florida | 4. Document number | | |
| 5. | The name of the registered agent and the registered of Florida Department of State; | fice address as shown on the records of the | | |
| | CESAR R. SORDO, ES | ŋ <u>.</u> | | |
| | Name 1200 Brickell Aven | | | |
| | Addres | 5 | | |
| | Miami, FL 33131 | | | |
| | City, State at | • | | |
| б. | 6. The name and address of the new registered agent and | | | |
| | RAMON PORTELA | <u> </u> | | |
| | Name | | | |
| | 717 Ponce De Leon | Blvd., Suite 230 | | |
| | Florida street address (P.O. | Box NOT acceptable) | | |

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.

City, State and Zip

Coral Gables, FL 33134

(Signature of a member or Pathonised representative of a member)

RAMON PORTELA
(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 have by confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent) Ramon Portela

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

INHS18(10/99)

FILING FEE: \$25.00

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