## 102000027245

MADISON WES, INC. PHOENIX PROFESSIONAL BUILDING 1509 NORTH MILITARY TRAIL, SUITE 115 WEST PAIM BEACH, FL 33409					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Submoss Ellis) Hallo)					
(Document Number)					
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SECTION PM 1:16

## ' 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 limit	ed liability company is	s: Evergree	n Park, LLC		
2. The mailing address of	of the limited liability of	company is: _	1509 N. Militar	y Trail	
West Palm Beach, F					
October 14, 2002			L02000027245		
3. Date of filing/registration in Florida			4. Document number		
5. The name of the regist Florida Department of		sistered office	address as show	n on the records of the	
	1509 N. Military T	Name rail			
•	Address , FL 33409		- TAA		
6. The name and address	y, State and Zi agent and/or o	•	O3 OCT 17 SECALIANS		
			Control of the Contro		
1509 N. Military Trail				EFFLORE II	
	ess (P.O. Box I	NOT acceptable	) MAR 6		
	West Palm Beach	, <sub>FL</sub> 3340	)9	<b>→</b>	
. , , ,	City,	State and Zip			
If the limited liability con	mpany is not organiza	d under the low	us of the State of	f Florida it is barabu	

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)

Dennis J. Caruso

(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, Tallahassee, FL 32314

**FILING FEE: \$25.00** 

INHS18(10/99)