## 102000029621

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## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 10, 2003

PETER RAY 712 US HIGHWAY ONE, SUITE 400 NORTH PALM BEACH, FL 33408

SUBJECT: SOMERSET 2002, LLC

Ref. Number: L02000029621

We have received your document for SOMERSET 2002, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 603A00014920

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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Somerset 2002, LLC (Name of corporation)
DOCUMENT NUMBER: L02000029621
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Peter R. Ray, Esq. (Name of person)
Cohen, Norris, Scherer, Weinberger & Wolmer (Name of firm/company)
712 US Highway One, Suite 400 (Address)
North Palm Beach, FL 33408 (City/state and zip code)  For further information concerning this matter, please call:
For further information concerning this matter, please call:
Peter R. Ray, Esq. at (561) 844 - 3600 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

INH(\$18(10/99)

## 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.	The state of the s
1. The name of the limited liability company is: Somerse	et 2002, LLC
2. The mailing address of the limited liability company is	: 900 N. Federal Highway, Suite 410
Roca Raton, FL 33432	
11/06/03	L02000029621
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered offic Florida Department of State:	e address as shown on the records of the
Elizabeth A. Brandon-Bro	wn, Esq.
Name	
900 N. Federal Highway, Address	Suite 410
Boca Raton, FL 33432	\$c: 8
City, State and	Zip EE
6. The name and address of the new registered agent and/or	c office:
Peter R. Ray. Esq.	· · · · · · · · · · · · · · · · · · ·
Cohen, Norris, Scherer,	Weinberger & Wolmer
Name	dea 400
712 U.S. Highway One, Su	
Florida street address (P.O. Box	(NOT acceptable)
North Palm Beach FL 33	3408
City, State and Zi	ip
If the limited liability company is not organized under the is confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is bereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the himited liability company.  [Finite or typed name of signee]  I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the program I am familiar with and accept the obligations of my portage of the provisions of	cords street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of se provided in the articles of organization or
(Signature of Registered Agent)  Division of Corporations, P.O. Box 63	27 Tallahassec, FL 32314
• Division of Colling allows, F.O. Dor on	mil a menterangeri e en man.

FILING FEE: \$25.00