L03000005686

(Re	questor's Name)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Coples	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		

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ALLISAN - SON HILL

O3 MAR 26 PM 1:

CT CORPORATION

March 26, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5805668 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

BR LAND COMPANY LLC (FL) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Katrina Forsman
Fulfillment Specialist
Katrina_Forsman@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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: BR LANI	COMPANY LLC		
2. The mailing address of the limited liability company is	: 350 South County Road, Suite 201		
Palm Beach, Florida 33480	7.5EC		
02/14/2003	L03000005686		
3. Date of filing/registration in Florida	4. Document number		
5. The name of the registered agent and the registered office Florida Department of State:			
Genius Wells			
Name			
250 C County Bood Sto 201			
350 S. County Road, Ste. 201			
Palm Beach, Florida 33414			
City, State and	Zip		
6. The name and address of the new registered agent and/o	r office:		
C T Corporation System			
Name			
1200 South Pine Island Road	· -		
	w NOT acceptable)		
Florida street address (P.O. Box NOT acceptable)			
Plantation FL 3332	24		
City, State and Zip			
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherwithe operating agreement of the limited liability company.	lorida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote of		
(Signature of a member or authorized representative of a member)	-		
Genius Wells, Manager/Member			
(Printed or typed name of signee)	<u> </u>		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my por Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan C T Corporation System	oper and complete performance of my duties.		
(Signature of Registere d Agent)			
Division of Corporations, P.O. Box 63	327, Tallahassee, FL 32314		

FILING FEE: \$25.00

FL015-9/27/99 C T System Online

INHS18(10/99)