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OF SEP 31 PH 3: 32

J. BRYAN SEP - 5 2006

COVER LETTER

Registration Section Division of Corporations
SUBJECT: Esplanade Estates Association, LLC (Name of Limited Liability Company)
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mark Pateman (Name of Person) OF PERSON OF
(Firm/Company) 3376 xels Lane (Address)
West Palm Beach FC 33401 (City/State and Zip/Code)
For further information concerning this matter, please call:
Mark Pakeman at (561) 835-947/ (Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$\text{Certified Copy}\$

INHS18 (8/05)

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	s: Esplana Le Estates Association, LLC
2. The mailing address of the limited liability of	
Palm Beach, FL 3348	· · · · · · · · · · · · · · · · · · ·
2/18/2003 3. Date of filing/registration in Florida	L0300006018
3. Date of filing/registration in Florida	4. Document number
Florida Department of State: Palema 312 Cleme	istered office address as shown on the records of the Name Address Beach, FL 33 401 7, State and Zip
6. The name and address of the new registered and address of the new regis	agent and/or office: Name SEP 31 PH 3: 33 SEP 31 PH 3: 33 SEP 31 PH 3: 33
confirmed that after the change or changes are and the business office of the registered agent valiability company, it is hereby confirmed that the	d under the laws of the State of Florida, it is hereby made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited ne change(s) was/were authorized by an affirmative vote y or as otherwise provided in the articles of organization ity company.
(Signature of a member of authorized representative of a mem (Printed or typed name of signee)	iman_
I hereby accept the appointment as registered comply with the provisions of all statutes relational I am familiar with and accept the obligation Chapter 608, F.S. Or, if this document is being address, I hereby confirm that the limited liabil	agent and agree to act in this capacity. I further agree to ve to the proper and complete performance of my duties, ons of my position as registered agent as provided for in a filed to merely reflect a change in the registered office lity company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

(Signature of Registered Agent)