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LAW OFFICES

Case & Mufflen
A LIMITED LIABILITY PARTNERSHIP

SUITE 102 2810 EAST OAKLAND PÄRK BOÜLEVARD FORT LAUDERDALE, FLORIDA 33306

JAMES L. CASE*
STEPHEN C. MUFFLER, LE.M.
*ALSO MEMBER MICHIGAN BAR

-- (954) 563-1000 FAX (954) 565-2047 WEB SITE: www.floridactosings.com

August 6, 2004

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

Re: Victoria Woods, LLC - Statement of Change of Registered Office or Registered

Agent or Both for Limited Liability Company

Dear Sir/Madame:

Enclosed please find Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company, together with a check in the amount of \$35.00, which represents payment of your fee for same.

Sincerely,

JAMES L. CASE, P.A.

Katie Osborne Legal Assistant

/klo encs.:

G:\KATIE\Corp\Sec of State - Statemt of Chnge.ltr

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: _VICTORIA WOODS, LLC.

2. The mailing address of the limited liability co	mpany is: 1555 NE 35+6 S+
Oakland Park FL 3333	4 -
May 30, 2003	L03000019523
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the regis Department of State:	stered office address as shown on the records of the Florida
	James L. Case, Esquire
_	Name Page 7
<u></u> 2	Address Address
	Fort Lauderdale, FL 33306
	City, State and Zip
6.7m 1.11 6.1 1.1	
6. The name and address of the new registered as	gent and/or office:
\mathcal{M}	ICHAEL KIMMEY 36°
/ E	-(- Name ; C.
10	33 NE 35 th 31
C) A	KLAND PARK FL 33334
<u> </u>	City, State and Zip
	City, State and Exp
	under the laws of the State of Florida, it is hereby confirmed that after
	reet address of the registered office and the business office of the
change(s) was/were authorized by an affirmative	of a Florida limited liability company, it is hereby confirmed that the vote of the members of the limited liability company or as otherwise
provided in the articles of organization or the op-	erating agreement of the limited liability company.
11.	
Illially Turis	* * * * * * * * * * * * * * * * * * *
(Signature of a member or authorized representation	this of a month of
	iive of a member)
MICHAEL KIMMEY	
(Printed or typed name of signee)	
nereby accept the appointment as registered age	ent and agree to act in this capacity. I further agree to comply with the and complete performance of my duties, and I am familiar with and
accept the obligations of my position as register	ed agent as provided/or in Chapter 608, F.S. Or, if this document is
being filed to merely reflect a change in the registe	ered office address, I hereby confirm that the limited liability company
has Been notified in writing of this change.	, , , , , , , , , , , , , , , , , , , ,
Mandella	
(Simon fundamental)	
(Signature of Registered Agent)	
Division of Comoration	ns P.O. Boy 6327 Tallahassee El 32314