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5801 Pelican Bay Boulevard Suite 300 Naples, Florida 34108-2709 Main Telephone #: 800-876-7962 Main Facsimile #: 239-393-2990

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	gio Shoppes, LLC Audit No.: H04000	1888273			-		ou SEP 21	
Comments	:						2 825	
Please file the attached regarding the above-referenced Florida limited liability company: 1. Change of Registered Agent.								
1. Change of Registered Agent.								
Thank you							-	
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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: Bellagio Shoppes, LLC 2. The mailing address of the limited liability company is: 1833 Martinique Way, Naples, FL 34119 09/18/2003 L03000035551 4. Document number Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Donald K. Ross, Jr. Name 599 Ninth Street N., Suite 599 Address Naples, FL 34119 City, State and Zip 6. The name and address of the new registered agent and/or office: Ellen A. Goldman, Esq. Name 5801 Pelican Bay Blvd., Suite 300 Florida street address (P.O. Box NOT acceptable) Naples, FL 34108 City, State and Zip 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) Filen A. Goldman, Authorized Representative of Mambers (Printed or typed name of algues) 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 accument is being filled 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.

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

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