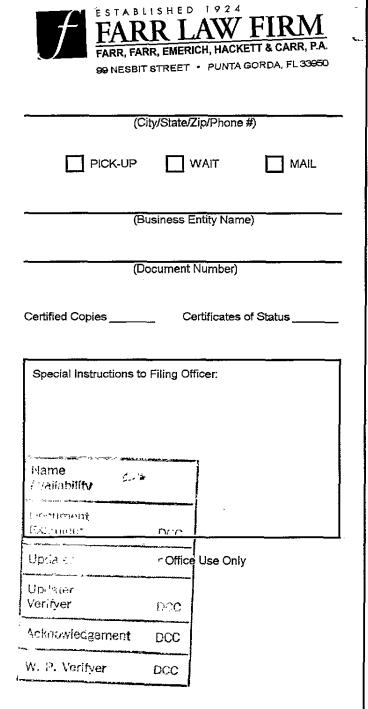
## L03000039614





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04/28/05--01051--012 \*\*25.00

SECULE CALL OF CALL

2505 AFR 28 ₽ 3:

## statement of change of registered office or registered agent or APR $\,1\,3\,$ 2005 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	d liability company is	PREMIER	R HOMES OF SOU	TH FLORIDA, LLC
2. The mailing address of	the limited liability of	company is:	15400 NW 34th Ave	<del>3.,</del>
Miami, FL 33054				
10/15/2003		<b></b>	L03000039614	
3. Date of filing/registrati	on in Florida		4. Document numbe	er ·
5. The name of the registe Florida Department of S			address as shown on t	he records of the
	201 Alhambra Cir.	Name		
	Coral Gables, FL	Address 33134 y, State and Zi	p	
6. The name and address of	of the new registered	agent and/or o	ffice:	
	David A. Holme		<u> </u>	
	99 Nesbit Street	Name		
Florida street address (P.O. Box NOT acceptable)				
	Punta Gorda	FL 33950	)	
	City,	State and Zip		15. 15. 15. 15. 15. 15. 15. 15. 15. 15.
If the limited liability common confirmed that after the chand the business office of liability company, it is her the members of the limite the operating agreement of	nange or changes are the registered agent when the registered agent with the confirmed that the confirmed th	made, the Flor will be identica ne change(s) w	ida street address of tal. Or, in the case of a saywere authorized by	the registered office  a Florida limited  y an affirmative vote of
(Signature of a member or authori	zer representative of a mem	ber)	<del>-</del>	
Robert J. Lodge, Mana	iger			<del>مبد</del>
(Printed or typed name of signee)  I hereby accept the appoint comply with the provision and I am furnhar with an Chapter 508 F.S. Or, if the address I hereby confirm  (Signature of Registered Agent)	ntment as registered s of all statules relati d accept the obligation his document is being that the limited liabil	agent and agr ve to the prop vns of my posit g filed to mere lity company h	ee to act in this capac er and complete perfo ion as registered age ly reflect a change in as been notified in w	city. I further agree to Frmance of my auties, nt as provided for in the registered office riting of this change.

FILING FEE: \$25.00

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

INHS18(10/99)