

Mar-08-04 09:54A

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Division of Corporations

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**L03000045305**

Florida Department of State  
Division of Corporations  
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TO:

Division of Corporations  
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Account Name : C T CORPORATION SYSTEM  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
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04 MAR -8 PM 12:00  
DIVISION OF CORPORATIONS

**REGISTERED AGENT CHANGE**

**ASN CYPRESS COVE LLC**

Certificate of Status	0
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Page Count	02
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MAR-08-2004 09:11

CT CORP

# 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: ASN Cypress Cove LLC
2. The mailing address of the limited liability company is : 115 NW 167th Street, Suite 33169  
North Miami Beach, FL 33169

3. Date of filing/registration in Florida 11/18/2003
4. Document number L03000045305

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

American Land Housing Group, Inc.  
Name  
115 NW 167th Street, Suite 300  
Address  
North Miami Beach, FL 33169  
City, State and Zip

6. The name and address of the new registered agent and/or office:

C T Corporation System  
Name  
1200 South Pine Island Road  
Florida street address (P.O. Box NOT acceptable)  
Plantation FL 33324  
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.

Christen Vinnola  
(Signature of a member or authorized representative of a member)

Christen Vinnola  
(Printed or typed name of signer)

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 document is being filed 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.

Christen Vinnola  
(Signature of Registered Agent)

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

RTHS:18(10/99)

FILING FEE: \$25.00

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