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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER •

TO: Registration Section Division of Corporations		
SUBJECT: TAMBURSHAM QUALITY (Name of	Y HOMES,L.L.C. f 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 concernir	ng this matter to the following:	
RALPH ROCHETEAU, ESQ		
(Name of Person)	······································	
RALPH ROCHETEAU & ASSOC. (Firm/Company)	O7 MAY SECRE FALLAN	
9360 SW 72 STREET,SUITE 225	O7 MAY 23 AM 10: 44 SECRETARY OF STATE FALLAHASSEE, FLORID	
(Address) MIAMI, FL 33173	O: 44 ELORIDA	
(City/State and Zip Code)		
For further information concerning this ma	atter, please call:	
RALPH ROCHETEAU, ESQ	at (305) 596-7884	
(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 follow	ving amount:	
 √ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

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: TAMBURSHAM QUALITY HOMES, L.L.C. 2. The mailing address of the limited liability company is : 6267 BOATWRITE ROAD, SPRING HILL, FL 34609 02/11/2004 L04000013569 3. Date of filing/registration in Florida Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: RALPH ROCHETEAU, ESQ Name 10305 NW 41 STREET, SUITE 111 Address **DORAL, FL 33178** City, State and Zip 6. The name and address of the new registered agent and/or office: RALPH ROCHETEAU, ESQ Name 9360 SW 72 STREET, SUITE 225 Florida street address (P.O. Box NOT acceptable) **MIAMI** FL 33173 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) 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.

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

(Signature of Registered Agent)