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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.

1 777 6.1 1: 1:	12: 1:::	any is. Realty Connecti	on LLC			
1. The name of the limit	, ,	any is				
2. The mailing address of	f the limited liab	ility company is: 4981 E	3rightmour (Jircle		
Orlando, Florida 3283	7					
February 27, 2004		L040	L04000015894			
3. Date of filing/registration in Florida 4. Document		cument numb	per			
5. The name of the regist Florida Department of		e registered office address	as shown on	the records of	the	
	Ricardo Quin	Name				
	12200 W. Colonial Drive, Suite 300K					
Address Orlando, Florida 34787						
		City, State and Zip				
6. The name and address	of the new regist	tered agent and/or office:		-		
	Victor Alvara	do		SEC ALL	-	
	4981 Brightm	Name our Circle		是一个	**************************************	
	Florida street	address (P.O. Box NOT ac	cceptable)	26 SSE		
	Orlando	_{FL} 32837		GF S	1	
		City, State and Zip		3. 04. 3. 04.		
confirmed that after the c and the business office of liability company, it is he	hange or change f the registered ag reby confirmed t ed liability compa	mized under the laws of the sare made, the Florida stregent will be identical. Or, that the change(s) was/werrany or as otherwise provide bility company.	et address of in the case of authorized	onda, it is hereb f the registered of f a Florida limite by an affirmativ	office ed re vote of	
(Signature of a member or author	ized representative of	a member)				
Ricardo Quintero						
(Printed or typed name of signee	•					
I hereby accept the appo comply with the provision and I am familiar with ar Chapter 608, 1, 2 Or, if address, I hereby confirm	intment as regist is of all statutes in a accept the obli this document is that the limited	ered agent and agree to ac relative to the proper and c igations of my position as r being filed to merely reflec liability company has beer	ct in this cape complete per registered ag ct a change in notified in v	acity. I further of formance of my ent as provided n the registered writing of this ci	agree to duties, for in office hange.	
(Signature of Registered Agent)						
Divisio	n of Corporation	ons, P.O. Box 6327, Tallal	hassee, FL	32314		

FILING FEE: \$25.00

INHS18(10/99)