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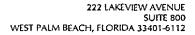
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SECRETARY OF STATE



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(561) 838-4516 FAX: (561) 514-3416 LAURA,RUMMANS@RUDEN.COM



January 25, 2005

State of Florida Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Statement of Change of Registered Agent regarding Burley Professional Building, LLC

Dear Sir or Madam:

Enclosed please find my client's Statement of Change regarding Registered Agent along with the filing fees of \$25.00. You will also find a copy of this document which I would ask that you stamp as received by your office. If additional information is required, please do not hesitate to contact us.

If you have any questions, please feel free to contact me.

Best regards,

Laura L. Rummans

LLR/wg Enclosures

WPB:196554:1

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	l liability company is	s: Burley Professional E	uilding, LLC
2. The mailing address of	the limited liability	company is: <u>3625 West Bro</u>	ward Boulevard .
		Ft. Lauderdal	e, Florida 33312
04/07/2004		L0400002649	16
Date of filing/registration in Florida 4. Document number		ımber	
5. The name of the register Florida Department of S	ed agent and the reg	istered office address as shown	on the records of the
	Rutherford Mulhall, P.A. Name		
	2600 N. Militar	ry Trail, 4th Floor Address	TALLS OF T
	Ft. Lauderdale, City	Florida 33312 y, State and Zip	D5 JAN 28 AM 10: 18 SECRETARY OF STATE TALLAMASSEE, FLORIST
6. The name and address o	f the new registered	agent and/or office:	SSEE I
-	Jeffrey Burley		FUST
	3625 West Browa	Name	2 0 m
_		ess (P.O. Box NOT acceptable)	
_	Ft. Lauderdale	FL 33312	_
	City,	State and Zip	
confirmed that after the cha and the business office of t liability company, it is here	ange or changes are in he registered agent weby confirmed that the liability company of	d under the laws of the State of made, the Florida street address will be identical. Or, in the case change(s) was/were authorizer as otherwise provided in the accompany.	s of the registered office e of a Florida limited ed by an affirmative vote of

Signature of a member of authorized representative of a member)

leffrey Burley

(Printed or typed name of signee)

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 auties, 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.

(Signature of Registered Agent)

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

FILING FEE: \$25.00

INHS18(10/99)