L04000055349

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

W1./18/04

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.

agent, or both, in the St	ate of Provida.		
1. The name of the lim	ited liability company is: _	BellaSol Condos, LLC	
2. The mailing address	of the limited liability com	npany is: 212 North Collins	Street, Suite 1
		Plant City, Florida	
July 27, 2004		L04000055349	
3. Date of filing/registr	ation in Florida	4. Document num	ber
5. The name of the regi Florida Department of		ered office address as shown o	n the records of the
	505 East Jackson St	Name treet, Ste. 202	
	Tampa, Florida 3360	Address 02 tate and Zip	2004 NOV SECRETI
6. The name and address	ss of the new registered age	ent and/or office:	
	Steven L. Sparkman		2 1 3Y 01 SEE,
	Name 212 North Collins Street, Suite 1		P! : 08 F STATE FLORIDA
	Florida street address	(P.O. Box NOT acceptable)	IDA OR
	Plant City,	FL 33563	
	City, Sta	ate and Zip	
confirmed that after the and the business office liability company, it is the members of the lim the operating agreemen	change or changes are mad of the registered agent will hereby confirmed that the c		of the registered office of a Florida limited I by an affirmative vote of
Mark D. Eklo	ionzed representative of a memoery	,	
(Printed or typed name of sign	ee)		
		ent and agree to act in this cap to the proper and complete pe of my position as registered a led to merely reflect a change company has been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.
(Signature of Registered Agen	t)		

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