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November 29, 2005

PAT GLASHEEN 18001 OLD CUTLER ROAD, SUITE 600 MIAMI, FL 33157

SUBJECT: SOUTH OF FIFTH, LLC

Ref. Number: L04000070830

We have received your document for SOUTH OF FIFTH, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline Document Specialist Letter Number: 205A00069429.



18001 Old Cutler Road, Suite 600 Miami, Florida 33157 T. 305-377-8802 F: 305-377-8804

Scott A Silver Fredric M Garvett Tim D Henkel Ira Cohen Glenn L Widom Aaron I Butler

Of Counsel Steven Mishan Robert A. Brandt

November 10, 2005

Division of Corporations P. O. Box 6198 Tallahassee, Florida 32314-6198

Re: Change of Address/ Registered Agent for South of Fifth, LLC

Dear Sir/Madam:

Enclosed is a Statement of Change of Address for Registered Agent for the active, together with our check in the amount of \$35.00, representing the fees

Sincerely,

Silver, Garvett & Henkel, P.

at Glasheen, Legal Asst.

pg encls.

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 Sta	te of Florida.		3	0	<i>33</i>	·	
1. The name of the limit	ed liability company is:	Sou	th of Fifth	, LLC			
2. The mailing address of	of the limited liability co	mpany is :	18001 01d	Cutler	Road-	Suite	600
	·		Miami, Flo	orida (33157		
09/29/04 L0400007				00070830	<u> </u>	· ·	
3. Date of filing/registra	tion in Florida		4. Document	number			
5. The name of the regist Florida Department of		tered office	address as sho	wn on th	e records	s of the	
•	Scott A. Sil						
	1110 Brickel	Name 11 Avenue	- PH One	•	TAI	200	
,	Miami, Flori	Address Ida 33131			T SE	S DEC	
		State and Zi	ip		ASS	=	
6. The name and address	•		•		Y OF S	2005 DEC 16. AM	
	Scott A. Sil	ver			STATE CRIDE	h0 :8	13.
	N 18001 01d Cu	Vame		`	豆吊	40	
	Florida street address						
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	Miami C: S:		3157				
	City, St	tate and Zip	•				
If the limited liability conconfirmed that after the cand the business office of liability company, it is he of the members of the litor the operating agreement.	change or changes are may feel the registered agent will be reby confirmed that the mited liability company ont of the limited liability	ade, the Florible be identic change(s) vor as otherw company.	rida street addi al. Or, in the o vas/were autho	ress of the case of a l orized by	e registe Florida I an affirn	red offi imited native v	ote
(Signature of a member of autho	rized representative of a member	;)					
Edie Laquer							
(Printed or typed name of signee	AT I	. 7			. • .	•	
I hereby accept the application of the comply with the provision and I am families with a Chapter 608 F.S. Or, if address, I hereby confirm	fintment as registered agns of all statutes relative and accept the obligations this document is being finthat the limited liability	rent and agr to the prop t of my posit iled to mere y company l	ree to act in thi er and comple tion as register ly reflect a che ias been notifi	is capacii te perfori red agent inge in th ed in writ	y. I furt mance of as provi ie registe ting of th	her agr f my dui ided for ered off is chan	ee to ties, in ice ge.
Signature of Registered Agent)		 -					
Divisio	on of Corporations, P.C). Box 6327	, Tallahassee.	FL 323	14		

FILING FEE: \$25.00