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## **COVER LETTER**

O: Registration Section Division of Corporations

SUBJECT:	CHAPEL HILL				
	(Name of	Limited Lial	bility Company)		
Dear Sir or Mada	am:				
The enclosed Re	gistered Agent/Registered	Office Chang	ge and fee(s) are submitted for filin	g.	
Please return all	correspondence concerning	g this matter	to the following:		
Peter H. Col	lins				
	(Name of Person)		<del>- · · · ,</del>	~ 3	ڼ
WAG Manag	gement, LLC			2006 FEB	VOISIAIC
	(Firm/Company)		<del></del>	<del>်ဘ</del> • ယ	F.
350 Camino	Gardens Blvd., Suite	e 102	<del></del>	PM	ION OF CORT WATER
	(Address)			J: 42	10.1 10.1
Boca Raton, F	FL 33432			10	-
	(City/State and Zip Code)				
For further inform	nation concerning this mat	ter, please ca	uli:		
Peter H. Colli	ns	at (561	347-6565		
(1)	lame of Person)		(Area Code & Daytime Telephon	ie Numb	er)
Registration Division of Clifton Bu	f Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
	e, Florida 32301				
Enclosed	is a check for the followi	ng amount:			
<b>✓</b> \$25 Fil	ling Fee	S55 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: CHAPEL H	IILL GARDENS LLC				
2. The mailing address of the limited liability company is:					
350 CAMINO GARDENS BLVD., SUITE 102, BOCA RATON, FL 33432					
OCTOBER 22, 2004	L04000076971				
3. Date of filing/registration in Florida	4. 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:  CORPORATION SERVICE COMPANY					
Name 1201 HAYS STREET	2006				
Address  TALLAHASSEE, FL 32301  City, State and Zi	FEB OCC				
6. The name and address of the new registered agent and/or of					
WAG Management LLC Name 350 Camino Gardens Blvd., Florida street address (P.O. Box )	Suite 102 5				
Boca Raton FL 3343	· · · · · · · · · · · · · · · · · · ·				
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)					
WAG MANAGEMENT LLC By: Peter H. Collins (Printed or typed name of signee)					
I hereby accept the appointment as registered agent and agr comply with the provisions of all statutes relative to the prop and I am familiar with and accept the obligations of my posit Chapter 608, P.S. Or, if this accument is being filed to mere address, I hereby confirm that the limited liability company h	ee to act in this capacity. I further agree to er and complete performance of my duties, ion as registered agent as provided for in y reflect a change in the registered office as been notified in writing of this change.				

Division of Corporations, P.O. Box 6327, Taliahassee, FL 32314 FILING FEE; \$25.00