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## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Ashley Glen Holdings, LL (Name o	.C f Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Luis A. Espino, Esquire	
(Name of Person)	<del></del>
Arnstein & Lehr LLP	06 APR 17 PM 2: 30
(Firm/Company)	ž
201 S. Biscayne Blvd., Suite 400	
(Address)	.;
Miami, FL 33131	30
(City/State and Zip Code)	
For further information concerning this ma	•
Luis A. Espino, Esquire (Name of Person)	at (305 ) 374-3330 (Area Code & Daytime Telephone Number)
(Name of Ferson)	(Area code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the follow	ing amount:
<b>▼</b> \$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (8/05)

## 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:	Ashley Glen Holdings, LLC
2. The mailing address of the limited liability co	mpany is: 8603 S. Dixie Highway, Suite 208 Miami, FL
33143	
12/21/2005	L05000121710
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the regis Florida Department of State:	tered office address as shown on the records of the
Gregory J. Blodig	
400.144.0	Name
100 W. Cypress Cree	
Ft. Lauderdale, FL 33	Address S S S
	State and Zip
6. The name and address of the new registered ag	Address 3309 State and Zip gent and/or office:  uire Arnstein & Lehr LLP Name , Suite 400 (P.O. Box NOT acceptable)
Luis A. Espino, Esq	uire Arnstein & Lehr LLP 고 결
	Name 2
201 S. Biscayne Blvd.	, Suite 400
Florida street address	(P.O. Box NOT acceptable)
Miami, FL 33131	FL
City, S	tate and Zip
liability company, it is hereby confirmed that the	ade, the Florida street address of the registered office ll be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote or as otherwise provided in the articles of organization company.
Genaro R. Garcia	
(Printed or typed name of signee)	
I hereby accept the appointment as registered as comply with the provisions of all statutes relative and I am familiar with and accept the obligation. Chapter 608, A.S. Or, if this document is being faddless, thereby confirm that the limited liability (Signature of Registered Agant)	gent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, so my position as registered agent as provided for in iled to merely reflect a change in the registered office y company has been notified in writing of this change.
1.	

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