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COVER LETTER

TO: Registration Division of	on Section f Corporations	•
SUBJECT: _B	(Name of Limited	Liability Company)
Dear Sir or Madar	n:	
The enclosed Regi	istered Agent/Registered Office C	hange and fee(s) are submitted for filing.
Please return all co	orrespondence concerning this ma	tter to the following:
<u>Zi</u>	Name of Person)	
Gold Coas	Firm/Company)	o'CS
1601 N	IW 13th St.	
Boca	Raton, FL 334 (City/State and Zip Code)	86
For further inform	ation concerning this matter, pleas	se call:
Por J	at (5)	(Area Code & Daytime Telephone Number)
Registration Division of Clifton Buil 2661 Execu	Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed i	s a check for the following amou	int:
♥\$25 Fili	ng Fee	\$55 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.

agem, or voin, in the state of Fioriaa.
1. The name of the limited liability company is: Biltmore 57, LLC.
2. The mailing address of the limited liability company is: 11001 NW 13 th 5+
Boca Raton, FL 33486
3/10/2006 L06000025912
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: Fred DeFalco, Sc. Name 3299 NW Boca Raton Blv d Address Boca Raton Fc 33431 City, State and Zip 6. The name and address of the new registered agent and/or office: Fred DeFalco, Sc. Name 1601 NW 13th St.
Florida street address (P.O. Box NOT acceptable) Boca Raton FL 33486 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. (Signatule of a member or authorized representative of a member)
(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 duties, 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. [Bignature of Registered Agent)
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00