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J. BRYAN

OCT - 9 2008

EXAMINER

## 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. Name of the limited liability company: SHELTER	GRANDE POINTE LLC
<ol> <li>(a) Principal office address of limited liability compa (<u>Note: MUST BE STREET ADDRESS</u>)</li> </ol>	ny: 1600 Hopkins Crossroads Minneapolis, MN 55305-2026
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1600 Hopkins Crossroads Minneapolis, MN 55305-2026
11/03/2006	ل L06000107022
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	on the records of the Florida Dept. of State:
Registered Agent:	C T Corporation System
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324
NEW Registered Agent:  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	James D. Vogel, Esq.  Vogel Law Office, P.A.  3936 Tamiami Trail North, Suite B
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.  (Signature of a member of authorized representative of a member)	reet address of the registered office and the business
(Printed or typed name of signee)  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my position. F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notifications of Registered Agent)  Division of Corporations, P.O. B.	d agree to act in this capacity. I further agree to proper and complete performance of my duties, and I on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby fied in writing of this change.

**FILING FEE: \$25.00** 

INHS18 (05/08)