

06/29/2012 16:52 FAX

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Division of Corporations

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From: Account Name : ARNSTEIN & LEHR LLP
Account Number : 120060900021
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**LLC REGISTERED AGENT CHANGE
SOUTHERN OAKS, LLC**

Certificate of Status	0
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Estimated Charge	\$25.00

D. BRUCE

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.416 or 605.502, 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: SOUTHERN OAKS, LLC2. (a) Principal office address of limited liability company: 4661 SW 71 AVENUE(Note: MUST BE STREET ADDRESS)MIAMI, FL 33155(b) Mailing address of limited liability company: 4661 SW 71 AVENUE(Note: MAY BE POST OFFICE BOX)MIAMI, FL 331552/22/2007

3. Date of filing/registration in Florida

L07000020354

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Department of State:

Registered Agent:

DAVID SHEAR

Registered Office Address:

201 ALHAMBRA CIRCLE
STE. 601
CORAL GABLES, FL 33134(b) Enter name of NEW Registered Agent and/or NEW Registered Office addressNEW Registered Agent:DAVID SHEAR, ESQ.NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

200 S. BISCAYNE BLVD, SUITE 3600
C/O ARNSTEIN & LEHR LLP
MIAMI, FL 33131

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

David Shear
Printed name, position or office

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 relating 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 605, 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.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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INFL15 (06/08)