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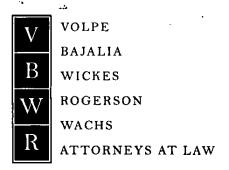
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TIMOTHY W. VOLPE · MICHAEL M. BAJALIA LESLIE A. WICKES JOHN T. ROGERSON, III ALAN S. WACHS ·· ROBERT E. WARREN *KENNETH C. STEEL, III MICHAEL D. LEE CHRIS T. HARRIS AMY SULLIVAN CROFT MATTHEW P. MCLAUCHLIN GREGORY J. LESAK, JR. ALENA A. KLESHIK GENESA L. EAVENSON CHARLES B. JIMERSON JOHN D. STEMEN BEAU A. BAKER

August 23, 2007

· Also Admitted in GA · Of Counsel

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

RE: Statement of Change of Registered Office ir or Madam:

Enclosed please find Statements of Change of Registered Office for nine limited recompanies (at \$25 each) and for fifteen corporations (at \$35 each). Enclosed is 7.5. liability companies (at \$25 each) and for fifteen corporations (at \$35 each). Enclosed is our firm's check in the amount of \$750 for the filing fees.

Please do not hesitate to contact me if you have any questions or comments.

Very truly yours,

Melinda Mantor Legal Assistant

Enclosures

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 many of the 19 stand 19 billion and and 19 Silverhera Broparties LLC		
1. The name of the limited liability company is: Silverberg Properties, LLC.		
2. The mailing address of the limited liability company is : 1944 Perregrine Circle South		
Jacksonville, FL 32259		
5-23-07 L07000054793	3	
3. Date of filing/registration in Florida 4. Document n		
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:		
Alan S. Wachs, Esq.	_	
Name	47	
1301 Riverplace Blvd., Suite 1700	_	
Address	TASE 71	
Jacksonville, FL 32207 City, State and Zip	- <u>58</u> 6	
6. The name and address of the new registered agent and/or office:	SECHETARY OF STATE ALLAHASSEE. FLORID	
Alan S. Wachs, Esq.	FOR PR	
Name	- STA	
501 Riverside Ave., 7th Floor		
Florida street address (P.O. Box NOT acceptable)	
Jacksonville, FL 32202		
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)		
DAVID SILVERBERG		
(Printed or typed name of signee)		
I hereby accept the expointment as registered agent and agree to act in this comply with the provisions of all statutes relative to the proper and complete and I am familiar with and accept the obligations of my position as registered Chapter 608, F.S. Or, if this document is being filed to merely reflect a chan address, I hereby confirm that the limited liability company has been notified	capacity. I further agree to performance of my duties, I agent as provided for in ge in the registered office in writing of this change.	

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

INHS18 (8/05)

Registered Agent)