

L070W112741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

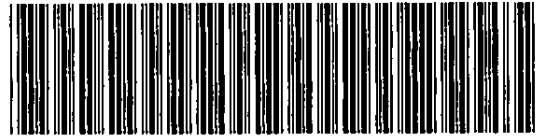
(Business Entity Name)

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EXAMINER

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CSC.

CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 364546 4305390
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 APR 28 AM 11:24

ORDER DATE : April 27, 2010
ORDER TIME : 4:24 PM
ORDER NO. : 364546-005
CUSTOMER NO: 4305390

CHANGE OF AGENT

NAME: SOBEL MONTVAIL, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER: _____

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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
10 APR 28 AM 11:24

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: SOBEL MONTVAIL, LLC

2. (a) Principal office address of limited liability company: 3 Grove Isle Drive, Apt. 1210
(Note: MUST BE STREET ADDRESS) Coconut Grove, FL 33133

(b) Mailing address of limited liability company: 3 Grove Isle Drive, Apt. 1210
(Note: MAY BE POST OFFICE BOX) Coconut Grove, FL 33133

November 7, 2007

L07000112741

3. Date of filing/registration in Florida

4. Document number

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

Registered Agent: Corporation Service Company

Registered Office Address: 1201 Hays Street
Tallahassee, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: Clifford M. Sobel

NEW Registered Office Address: 3 Grove Isle Drive, Apt. 1210
(MUST BE FLORIDA STREET ADDRESS) Coconut Grove, FL 33133

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.

Gary A. Phillips
(Signature of a member or authorized representative of a member)

Gary A. Phillips, Esq., Authorized Representative
(Printed or typed name of signer)

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.

Clifford M. Sobel
(Signature of Registered Agent) Clifford M. Sobel

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