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Florida Department of State
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YF MT. CARMEL, LLC

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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 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: VF MT. CARMEL, LLC

2. (a) Principal office address of limited liability company: 1423 EAST BRANDON BLVD
BRANDON FL 33811 US
 (Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company:
 (Note: **MAY BE POST OFFICE BOX**)

G/O BRODERICK & ASSOC
5514 PARK BLVD
PINELLAS PARK FL 33781 US

04/01/2010

3. Date of filing/registration in Florida

L10000035739

4. Document number

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

Registered Agent:

STROSS, CHRISTY S

Registered Office Address:

6475 15TH AVENUE SO
ST. PETERSBURG FL 33707 US

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

NEW Registered Agent:

Leonard S. Englander

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

Englander Fischer
721 First Avenue North
St. Petersburg, FL 33701

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 member or authorized representative of a member

John E. Simas, MGR

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.

Signature of Registered Agent

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

FILING FEE: \$25.00

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