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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE ISLES AT BAYSHORE CLUB, 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 605.0114 or 605.0116, 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.

i Na	me of the limited liability company:			
2. (a)	730 N.W. 107TH AVENUE		(b) 700 N.W	107th Avenue
2. (a) _	Principal office address of limited lis (Note: MUST BE STREET A			Mailing address of limited Hability company: (Note: MAY BE POST OFFICE BOX)
	SUITE 300		Suite 400	
	MIAMI, FL 33172		Miami, Fi	33172
	04/07/2010		L10000037	268
3. 5. (a)	Date of filing/registration in CT CORPORATION SYSTEM	i Florida	4.	Document number
J. (<u>B</u>)	Registered Agent and Registered Office sho	wn on the records of th	ne Florida Dept. of Stat	\$:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
(b)	PLANTATION	, FL	33324	2.420 JUL
	Corporate Creations Network Inc.			. UL -
	Enter name of NEW Registered Agent and	or NEW Registered	Office address:	٩
	801 US Highway 1			AH 9:
	NEW Registered Office Address:			36
	North Palm Beach	, FL_	33408	
agent v	or changes are made, the Florida str	eet address of the r Florida limited lial of the members of	registered office an oility company, it i the limited liabilit imited liability cor	orida, it is hereby confirmed that after the d the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
Signa	sture of a member of supplicitized representative	of a member		Printed or typed name of signee
I here provise the objecto mer	_		ee to act in this cap performance of my for in Chapter 60. ereby confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
Signati	Danie of Registered Agent	lle Gossman, Specia	l Secretary	
				DT 20214

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