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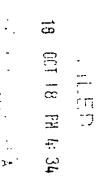
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COVER LETTER

TO: Registration Section

Divi	sion of Corporations				
SUBJECT:	FOUNTAIN LAKE APARTMENTS LLC Name of Limited Liability Company				
JOBJECT.					
Dear Sir or M	Madam:				
The enclosed	d Registered Agent/Registered Offic	e Change and	I fee(s) are submitted for filing.		
Please return	all correspondence concerning this	matter to the	following:		
ASHLEE \	VEGA				
	Name of Person		<u> </u>		
BEACHW	OLD RESIDENTIAL, LLC				
	Firm/Company		_		
192 LEXIN	NGTON AVENUE, SUITE 901				
	Address				
NEW YOR	RK, NY 10016				
	City/State and Zip Code				
AVEGA@	BEACHWOLD.COM				
E-mail	address: (to be used for future annu	al report noti	lication)		
For further is	nformation concerning this matter, p	olease call:			
ASHLEE \	/EGA	646 _ at (354-2114		
	Name of Person	(Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations ton Building I Executive Center Circle ahassee, Florida 32301	Re Di P.e	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enc	losed is a check for the following a	imount:			
1 \$2	25 Filing Fee	□ s	55 Filing Fee & Certified Copy		
INHS18 (2/14)				

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.

1.	Name of the limited liability company: FOUNTAIN I	_AKE APA	RTMENTS LLC		
2. (a)	(b)			
·	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	, ,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	192 LEXINGTON AVENUE, SUITE 901	15	92 LEXINGTON AVENUE, SUITE 901		
	NEW YORK, NY 10016	N	EW YORK, NY 10016		
	11/07/2012	L1	2000141413		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	The Kammerman Law Group, P.A.		.		
J. (.	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET				
	123 NW 13th Street, Suite 312				
	Boca Raton .FI	33432			
41	South Oxford Management LLC				
(b	Enter name of NEW Registered Agent and/or NEW Registered	d Office addres	 V:		
		-	_		
	NEW Registered Office Address;				
	3701 Danforth Drive #804				
					
	Jacksonville , FI	32224			
the clagent was/v the a	elimited liability company is not organized under the la hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- were authorized by an affirmative vote of the members of tricles of organization or the operating agreement of the	f the register iability comp of the limited limited liab	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in		
Sign	nature of a member or authorized representative of a member	-	Printed or typed name of signee		
provi the o to me notifi	weby accept the appointment as registered agent and ages sions of all statutes relative to the proper and complete bligations of my position as registered agent as providerely reflect a change in the registered office address, I sed in writingfof this change.	ree to act in performanced for in Cha hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been		
Signa	ture of Registered Agent				