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COVER LETTER

TO: Registration Section
Division of Corporations

_{sub.rect:} MBR Waterview Management, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pamela J. Anselmo

Name of Person

Becker & Poliakoff, P.A.

Firm/Company

1 East Broward Blvd, Suite 1800

Address

Ft. Lauderdale, FL 33301

City/State and Zip Code

panselmo@bplegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pamela Anselmo

₄, 954

987-7550

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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.

Jest, we will be a second	
1. Name of the limited liability company: MBR Watervlew Manage	ement, LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	404 Fifth Avenue 6th Floor New York, NY 10018
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Same as above
	L13000013049
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
Registered Agent:	Anselmo, Pamela JESQ.
Registered Office Address:	3111 Stirling Road Ft. Lauderdale, FL 33312
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEY</u>	W Registered Office address:
NEW Registered Agent:	Becker & Pollakoff c/o Parnela Ansaimo
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1 East Broward Blvd. Suite 1800
(MODI VII HOMEDITO LA PARTICIONALES)	Ft. Lauderdale ,FL 33301
If the limited liability company is not organized under the longifirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company.	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of
Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 605, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my auties, sition as registered agent as provided for in
Chapter 605, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company Signature of Registered Agent	rely reflect a change in the registered office y has been notified in writing of this change.

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