8000000874

Document Number Only

CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 Tel 850 222 1092 Fax 850 222 7615 Attn: Jeff Netherton

900008402889m=5

CORPORATION(S) NAM	ME	*****85.00 *	*****85.00
Tarragon Stoneybrook Ap	partments, L.L.C.		
() Profit () Nonprofit	() Amendment	() Merger	
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark	
() Limited Partnership () LLC	() Annual Report () Name Registration () Fictitious Name	() Other (x) Change of RA	00 SEP
(x) Certified Copy (2)	() Photocopies	() CUS	3 =≥
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up	ED ED PM 12: 05
Name Availability Document	09/25/00	Order#:	tenu
Examiner Updater Verifier		Ref#:	And the second s
Acknowledgement W.P. Verifier		Amount:\$	

Florida Department of State, Sandra B. Mortham, Secretary of State

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

	the provisions of sections 608.416 or apparty organized under the laws of the St		mdersigned limited ,	
•	following statement in order to change i	_	d agent, or both, in	
la. The name of the limited liability company is: Tarragon Stoneybrook Apartments, L.L.C.				
	ling address of the limited liability comp	panyis: <u>3100 Monticello Ave</u>	e., Suite 200,	
1c. Date of i	filing/registration in Florida: 06/24/98	Document number: L9	8000000874	
2. The name	e and address of the current registered ag	ent and office:		
	J. Lindsay Builder, Jr.	-		
	369 N. New York Ave., 3rd Floor,	Winter		
	Park, FL 32789	=	OO SEP	
3. The name	e and address of the new registered agent	and office: (P.O. BOX NOT AC	CEPTABLE)	
	CT CORPORATION SYSTEM	<u>.</u> <u>-</u>	<u> </u>	
	1200 South Pine Island Road	· · · · · · · · · · · · · · · · · · ·	MIR: 05 CF STATE CF TORB	
	Plantation, FL 33324		>	
of the register Such change company or company. Kathu		majority of the members of the	limited liability limited liability	
Having beel limited liab in this cape proper and	ted or typed name and title) In named as registered agent and to accept the appo- acity. I further agree to comply with to complete performance of my duties, and to as registered agent.	intment as registered agent and the provisions of all statutes re	l agree to act clative to the	
CT CORPORA	ATION SYSTEM	9/8/20		
(Sign	nature of Registered Agent)	(Date)	····	

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

FILING FEE: \$35.00

INHS18(3/95)