## L99000002288

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ACCOUNT NO. : 072100000032 REFERENCE : 354244 AUTHORIZATION : COST LIMIT : ORDER DATE: May 5, 2005 ORDER TIME : 10:36 AM ORDER NO. : 354244-005 CUSTOMER NO: 4385680 CUSTOMER: Ms. Vicky Garrigo Meland Russin Hellinger & Suite 3000 200 S. Biscayne Blvd. Miami, FL 33131 CHANGE OF AGENT LEVIEV BOYMELGREEN MARQUIS NAME: DEVELOPERS, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX \_\_\_ CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER:

## 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.

agent, or born, in the state	-		
1. The name of the limite	d liability company is:	Leviev Boymelgreen Mare	quis Developers, LLC
2. The mailing address of	the limited liability co	mpany is : c/o A.I. Boymelo	reen, 700 Pacific Stree
Brooklyn, NY 11217	-		
4/22/1999		L9900000228	8
3. Date of filing/registration	on in Florida	4. Document nur	mber
5. The name of the register Florida Department of		tered office address as shown	on the records of the
•	Registered Agents	of Florida, LLC	_
	100 Southeast Sec	Name ond Street, Suite 2900	•
	Miami, Fiorida 3313	Address 11	
	City,	State and Zip	os Ali
6. The name and address	of the new registered ag	ent and/or office:	05 MAY SECRET
	Andrew B. Hellinger	r, Esq.	ASSI
	200 So. Biscayne B	Vame Ivd., Suite 3000	5 MAY -5 AM 8: 3 EGRETARY OF STATELAHASSEE, FLORE
	Florida street address	(P.O. Box NOT acceptable)	B: 3: STATE
	Miami	<sub>FL</sub> 33131	
	City, S	tate and Zip	•
confirmed that after the cland the business office of liability company, it is her the members of the limite the operating agreement (Signature of a member or author)	the registered agent wireby confirmed that the diability company or a fithe limited liability company or a fithe limited liability contains the liability contains	r)	of the registered office of a Florida limited
Andrew B. Hellinger, A		ative 	
(Printed or typed name of signee)  I hereby accept the appoint the provision and I am familiar with an Chapter 508, F.S. Or, if a address, I hereby confirm (Signature of Registered Agent)		gent and agree to act in this co to the proper and complete p s of my position as registered iled to merely reflect a chang y company has been notified i	spacity. I further agree to verformance of my duties, agent as provided for in e in the registered office in writing of this change.

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

INHS18(10/99)

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