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M. HODGES

08/08/05--01066--015 **25.00



FILING REQUEST

August 3, 2005

FLORIDA DEPARTMENT OF STATE

Type of Filing: CHANGE OF AGENT

Subject(s): SUN COMMUNITIES ACQUISITIONS, LLC

Form(s) Enclosed: STATEMENT OF CHANGE OF REGISTERED OFFICE / AGENT

Supporting Document(s): NONE

Check Enclosed: CHECK# 19935 FOR \$25.00

Return Via: REGULAR MAIL - SASE ATTACHED

Filing Method: ASAP

PLEASE RETURN TO: PREMIER CORPORATE SERVICES, INC.

590 PARK STREET, SUITE 6

ST. PAUL, MN 55103

Please call me at 1-800-227-1256 if there are any questions.

Thank you!

Melissa Hobbs

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.

1. The name of the limite	d liability company is: Sun Co	mmunities Acquisitions, LLC	·
	the limited liability company i		·
27777 Franklin Road, Suite	200, Southfield, MI 48034		
11/26/2001		M01000002643	
3. Date of filing/registration in Florida		4. Document number	
5. The name of the register Florida Department of S	ered agent and the registered of State:	fice address as shown on the records of th	ıe
	CT Corporation System		
	Name		
	1200 South Pine Island Road	•	G
	Address	<u> </u>	
	Plantation, FL 33324		
	City, State an	id Zip	် ငြာ
6. The name and address	of the new registered agent and	Vor office:	
	NRAI Services, Inc.		25
	Name 2731 Executive Park Drive, Suite	4	6.
	Florida street address (P.O. I	Box NOT acceptable)	
	Weston FL 33	3331	
	City, State and	······································	
confirmed that after the cl and the business office of liability company, it is her the members of the limite	hange or changes are made, the the registered agent will be ide reby confirmed that the change	te laws of the State of Florida, it is hereby Florida street address of the registered of entical. Or, in the case of a Florida limite (s) was/were authorized by an affirmative wise provided in the articles of organization.	ffice d vote of
Signature of a member or author	ized representative of a member)	<u></u>	
Jonathan Colman (Printed or typed name of signee) I hereby accept the appoorant I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm NRAI Services, Inc.		d agree to act in this capacity. I further a proper and complete performance of my position as registered agent as provided merely reflect a change in the registered any has been notified in writing of this ch	gree to duties, for in office lange.
(Signature of Registered Agent) Sue Johnson, Asst. Secreta	arv	6327, Tallahassee, FL 32314	

INHS18(10/99) FILING FEE: \$25.00