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June 15, 2004

Florida Department of State Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

RE: The Residences at Towncenter, LLC

To Whom It May Concern:

Enclosed please find for filing a Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company on behalf of The Residences at Towncenter, LLC. Also enclosed is a check in the amount of \$25.00 for the filing fee. Please return a conformed copy of the Statement of Change of Registered Office or Registered Agent to the undersigned in the enclosed stamped, self-addressed envelope.

Should you have any questions regarding this filing or the enclosed documents, or if you require additional information, please feel free to contact me.

Thank you for your attention to this matter.

Very truly yours,

L. Paige Younkins

for Andersen, Tate, Mahaffey & McGarity, P.C.

Enclosures

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 limited liability company is:	The Residences at Townce	nter, LLC		
	. The mailing address of the limited liability company is: P.O. Box 611575,				
	osemary Beach, FL 32461	<u> </u>			
s	eptember 18, 2003	M03000003125			
3. Date of filing/registration in Florida		4. Document number			
	The name of the registered agent and the regist Florida Department of State: CT Corporation Sys		the records of the		
	1200 South Pine Isla		SEC TALL		
	Plantation, FL 3332	Address 4 State and Zip	FIL JUN 16 PRETAR LAHASI		
6.	The name and address of the new registered ag	ent and/or office:	TARY CT S		
	Brad Zeitlin				
	8 Georgetown Aven	lame ue, Suite 8A, 1st Floor	RDA 12		
	Florida street address	(P.O. Box NOT acceptable)	•		
	Rosemary Beach	FL_32461			
٠	City, St	tate and Zip	•		
an lia	the limited liability company is not organized unfirmed that after the change or changes are made the business office of the registered agent will bility company, it is hereby confirmed that the emembers of the limited liability company or a coperating agreement of the limited liability company or a member of a	ade, the Florida street address of the identical. Or, in the case of change(s) was/were authorized as otherwise provided in the artispreparty.	f the registered office f a Florida limited		
Е	rad Zeitlin				
	rinted or typed name of signee)		•		
I co an Ci ao	hereby accept the appointment as registered ag mply with the provisions of all statules relative at I am familiar with and accept the obligations apter 608, F.S. Or, if this document is being f dress, I hereby confirm that the limited liability	rent and agree to act in this cap to the proper and complete per s of my position as registered as iled to merely reflect a change i y company has been notified in	acity. I further agree to formance of my duties, gent as provided for in the registered office writing of this change.		
(8	ignature of Registered Agent)				

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