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J. BRYAN

JAN 2 8 2008

EXAMINER

PARANET CORPORATION SERVICES, INC.

3761 Venture Drive, Suite 260 Duluth, Georgia 30096 770-497-9977 / 800-277-9977 Fax 770-813-0477 / fax 800-815-0477

TRANSMITTAL LETTER

January 18, 2008

RE: Post Walk At Citrus Park Village, LLC

TO: Florida Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RE: Maggie Ferdinand – maggie@paranetlegal.com
Paranet Job No. 08-01-0021

Please file/submit the following on behalf of the above:

1. Change of Agent Application for each of the above

After filing return evidence by:

1. Fax (800) 277-9977

2. Check No. <u>90265</u>

2. Mail in self address, stamped envelope

If you have any questions, please call me using our toll free number (800) 277-9977.

Amount \$25.00

THANK YOU FOR YOUR EXCELLENT SERVICE®

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.

The name of the limited liability company is: POST WALK AT CITRUS PARK VILLAGE, LLC The mailing address of the limited liability company is: 4401 NORTHSIDE PKWY., SUITE 800, ATLANTA, GA 30327	·
4401 NORTHSIDE PKWY., SUITE 800, ATLANTA, GA 30327	
4/18/2007 M05000003446	
3. Date of filing/registration in Florida 4. Document number	
5. Date of Hang registration in Problem	
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:	
CT Corporation System	
Name	0
1200 South Pine Island Road	<u>₹</u>
1200 South Pine Island Road Address Plantation, FL 33324	<u> </u>
Plantation, FL 33324 City, State and Zip	무닭
6 The name and address of the new control of the co	527
NRAI Services, Inc. Name	수무
NRAI Services, Inc.	RATA
Name Si	2m
2731 Executive Park Drive, Suite 4	S
Florida street address (P.O. Box NOT acceptable)	
Weston FL 33331	
City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered offi and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vof the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Sherry W. Cohen (Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree comply with the provisions of all statutes relative to the proper and complete performance of my durant I am familiar with and accept the obligations of my position as registered agent as provided for Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered off address, I hereby confirm that the limited liability company has been notified in writing of this chan NRAI Services. In Main and accept the object of the proper and complete in writing of this chan NRAI Services. In Main and the limited liability company has been notified in writing of this chan NRAI Services. In Main and the limited liability company has been notified in writing of this chan NRAI Services. In Main and the limited liability company has been notified in writing of this chan need to the proper and complete performance of the limited liability company has been notified in writing of this chan need to the proper and complete performance of the limited liability company has been notified in writing of this chan need to the proper and complete performance of the limited liability company has been notified in writing of this chan need to the proper and complete performance of the limited liability company has been notified in writing of this chan need to the proper and the limited lia	rote tion
NRAI Services. In Magneture of Registered Akerd) (Signature of Registered Akerd) Maggie Ferdinand	o

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