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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Na	ane of the limited liability company:	om Pointe at	at the Villages, LLC							
2. (a)	(b)									
(-)	Principal office address of linuted liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BOX</u>)							
	111 WESTWOOD PLACE, SUITE 460		111 WESTWOOD PLACE, SUITE 400							
	BRENTWOOD, TN 37027		BRENTWOOD, TN 37027 M05000005085							
	09/14/2005									
3.	Date of filing/registration in Florida	-4.	Document number							
-	Registered Agent and Registered Office shown on the records CORPORATION SERVICE COMPANY Registered Office Address <u>(MUST BE FLORIDA STREE</u> 1201 HAYS STREET									
	TALLAHASSEE	FL 32301								
(ს)	C T Corporation System		dures SECTOR							
(-7	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regists</u>									
	NEW Registered Office Address:									
	1200 South Pine Island Road									
	Plantation	. FL								

If the limited liability company is not organized under the faws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office 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 vote of the members of the limited liability company or as otherwise provided in ization or the operating agreement of the limited liability company.

Jeffrey Miller	Jeffrey H. Miller		
Signature to a member or authorized representative of a member	Printed or typed name of signee		
C T Corporation System	gree to act in this capacity. I further agree to comply with the e-performance of my duties, and I am familiar with and accep led for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been Michael Jones, Assistant Secretary		
Division of Corporations• P.O.	. Box 6327• Tallahassee, FL 32314 FEE: \$25.00		