

02/15/2008 10:37

850-245-6897

FL DEPT OF STATE

PAGE 01/05

Feb. 15. 2008 10:41AM

706000003946

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000040452 3)))



H080000404523ABCK

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : ROGERS, TOWERS, BAILEY, ET AL
Account Number : 076666002273
Phone : (904) 398-3911
Fax Number : (904) 396-0663

2008 FEB 15 A 10:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

RECEIVED
2008 FEB 15 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

MIDTOWN CENTRE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

A. LUNT
FEB 18 2008
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

Feb. 15. 2008 10:42AM

No. 1066 P. 2

H08000040452

**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: Midtown Centre, LLC
2. The mailing address of the limited liability company is: c/o Post & Romero, 3195 Ponce de Leon Blvd., Suite 400, Coral Gables, Florida 33134

7/17/2008M08000003948

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Roger W. Kellogg

Name

3947 Boulevard Center Drive, Suite 5

Address

Jacksonville, Florida 32207

City, State and Zip

6. The name and address of the new registered agent and/or office:

Carlos A. Romero, Jr.

Name

3195 Ponce de Leon Blvd., Suite 400

Florida street address (P.O. Box NOT acceptable)

Coral Gables FL 33134

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 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 the articles of organization or the operating agreement of the limited liability company.

[Signature] PRESIDENT
(Signature of a member or authorized representative of a member)

Roger Kellogg
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby certify that the limited liability company has been notified in writing of this change.

[Signature] Partner
(Signature of Registered Agent)

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

FILING FEE: \$25.00

DHFS18 (8/05)

H08000040452

FILED
 2008 FEB 15 A 10:23
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA