File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILING \$ 188.	D LIABILITANNUAL R 199 FEE Ann. 75 Ma	ual Report \$1 ike Check Pay	00.00 + \$88.75 /able To: FLOR	99 IIAY 18 PH 2: 58 SECTION FOR TALLAHASSAN FLORIDA						
DOCUMENT # M9400000 DELANCEY ST COCONUT CREEK, LLC 1827 WALDEN OFFICE SQUARE SUITE 550 SCHAUMBURG IL 60173							1827 WALDEN OFFICE SQUARE SUITE 550 SCHAUMBURG IL 60173			
2 Princip	al Place of Bus	siness	2a. Ma	iling Address	ng Address			ed or Qualified	3a. State of Formation	
							12/12/1	994	IN	
Suite, Apt. #, etc.				Suite, Apt. #, etc.			4. FEI Number		Applied For	
City & Sta	te	City & S	State			35-1935023		Not Applicat	ole	
Zip	Country		Zip	Z ₁ p Co		ry	5. Date of Last F	Report	6. Certificate of Status Desire	;d
							04/23/1	998	\$8.75 Additional Fee Required	
	and Address of	Current Registere	d Agent	Agent 8.			Name and Address of New Registered Agent/Office			
1AKE 3985	LEROY K DELI, LI AD FL 334			Street Address (P. Suite, Apt. #, etc. City			P.O. Box Number is Not Acceptable) Zip Code			
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations										
SIGNATU	RE							DATE		
10. Title	naging Members/I		(NOTE Registried A)	OTE: Registered Agent signature required wher remetative Business Street Address			City, State a			
MGR		ESOURCE,	-	1827 V	VA LD	EN OFFICE) (1) (1) (1) (2) -05/2	4BURG IL PRARASS 7/9301090012 188.75 ****188.	
							· · · · · · · · · · · · · · · · · · ·	do	15/24/99	

11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If unther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Brock 10, or on an attachment with an address. LeRoy K. Messenger 4/13/99 847/303-5677