

ACCOUNT NO.

072100000032

REFERENCE

316567

7185477

AUTHORIZATION :

COST LIMIT :

ORDER DATE: July 22, 1999

ORDER TIME_: 12:41 PM

ORDER NO. : 316567-390

CUSTOMER NO: 7185477

000002947880---08/02/99--01126--006

*****35.00 *****35.00

Teresa Homolka, Paralegal CUSTOMER:

Affordable Residential

555 17th Street

Suite 1600

Denver, CO 80202

CHANGE OF AGENT

NAME: ACR IV, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson

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.

		C_IV, L.L.C. d/b/a Deerpo	Community
2. The mailing address of	of the limited liability compar	ny is :	<u> </u>
			•
T-1 / 1000		м9900000162	
February 4, 1999 3. Date of filing/registration in Florida		4. Document number	
The name of the regist Florida Department of		office address as shown on the	e records of the
	CT Corporation Syste	m	
	Nar	ne	
	1200 South Pine Isla		
	Addı	ess -	Je 9
	Plantation, FL 3332		SECULLIA
	City, State	and Zip	
6. The name and address	of the new registered agent a	and/or office:	ASSET
	Corporation Service	Company	AND -
	Name		S & &
	1201 Hays Street		<u> </u>
	Florida street address (P.C	D. Box NOT acceptable)	-1,
	Tallahassee FL		
	City, State a	and Zip	
confirmed that after the and the business office liability company, it is he a majority of the memborganization or the regul	change or changes are made of the registered agent will ereby confirmed that the char	nder the laws of the State of the Florida street address of the identical. Or, in the case age(s) was/were authorized by company or as otherwise provicompany.	t the registered office of a Florida limited an affirmative vote of
Scott Jackson, Ma	nager		
(Printed or typed name of signe	e)		-
I hereby accept the app comply with the provisic and I am familiar with document is being filed the limited liability comp Corporation Servi	ointment as registered agent ons of all statutes relative to a and accept the obligation to merely reflect a change in cany has been notified in writ ce Company	and agree to act in this capac the proper and complete perfo s of my position as registere the registered office address, ting of this change.	ity. I further agree to ormance of my duties ed agent. Or if thi I hereby confirm tha

FILING FEE: \$35.00

Karen E. Wehner, Asst. Vice President Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(9/97)