

NO5000003606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

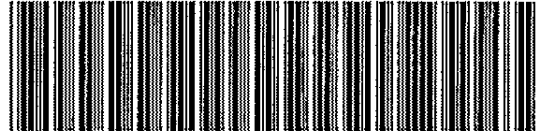
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Grove at River Oaks, H.O.A.
(Name of Corporation)

DOCUMENT NUMBER: N05000003606

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark McKnight
(Name of Person)

Residential Management Concepts, Inc.
(Name of Firm/Company)

4350 NW 19th Ave., Suite C
(Address)

Pompano Beach, FL 33064
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark McKnight at (954) 956 9918 ext 201
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Grove at River Oaks Home owned Association

2. The principal office address: 200 South Park Road Suite 455
Hollywood, FL 33021

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 04/27/05 Document number: NO500003606

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Andrew T. Burnham
200 South Park Rd, Suite 455
Hollywood, FL 33021

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Gary Plumbi
4350 NW 19th Ave, Suite C
(P.O. Box NOT acceptable)
Pompano Beach, FL 33064

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer or director)

Mark Mc Knight - A/E. prop My r
(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

8/29/06
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314