Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEF & SITTERSON,

Account Number : I20060000135
Phone : (305)789-3200

Fax Number : (305)789-3395

NE CELVES 1009 SEP 24 AM 8: 01 SECRETARY OF STATE VILAHASSEE, FLOAIR

REGISTERED AGENT CHANGE

MET 1 MASTER ASSOCIATION, INC.

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STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Section 617.0502 Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office and registered agent in the State of Florida.

- 1. The name of the corporation is Met 1 Master Association, Inc., a not for profit corporation.
- 2. The principal office address and the mailing address is 300 South Biscayne Boulevard, c/o Management Office, Miami, Florida 33131.
- 3. The date of incorporation is 04/09/2008 and the Document number is N08000003492.
- 4. The name and street address of the current registered agent and registered office on file with the Florida

 Department of State is:

Thomas V. Eagan 4000 Wachovia Financial Center 200 South Biscayne Blvd. Miami, Florida 33131

5. The name and street address of the new registered agent and registered office is:

Stearns Weaver Miller Weissler Alhadeff & Sitterson, P.A.
c/o Richard E. Schatz
150 West Flagler Street, Suite 2200
Miami, Florida 33130

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 of an officer or director 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 as writing of this change.

If signing on behalf of an entity:

igniture Registered Agent

Typed or Printed Name

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