P02000012356

(Re	questor's Name)	
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<i>(Ct</i>	y/State/Zip/Phon	B #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
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SECRETARY OF STATE
AND SEEF, FLORIDA

12/2/02 RO Change

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporation	ns		- -
SUBJECT: LNR Sabella Limi	ted, Inc.		
	(Name o	f corporation)	
DOCUMENT NUMBER: F	02000012356	<u> </u>	
The enclosed Statement of Ch	ange of Registered (Office/Agent	and fee are submitted for filing.
Please return all corresponden	ce concerning this n	natter to the f	following:
Shelly L. Rubin			
(Name o	f person)		
c/o LNR Property Corporation			_
(Name of fir	m/company)		-
1601 Washington Avenue, 8th F	Floor		
(Add	ress)		_
Miami Beach, Florida 33139			_
(City/state a	nd zip code)	,	•
For further information concer	ning this matter, ple	ase call:	
Zena M. Dickstein	at (305 ₎	485-2098
(Name of person	1) (Area code &	485-2098 daytime telephone number)
Enclosed is a \$35.00 check ma	de payable to the De	epartment of	State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Addre Amendment Division of C 409 E. Gaine Tallahassee, 1	Section Corporations s Street	-

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

	ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stati of change is submitted for a corporation organized under the laws of the State of	utes,				
Florida	in order to change its registered office or registered agent, or both, in the	State				
of Florida.						
1. The name of	f the corporation: LNR Sabella Limited, Inc.		_			
2. The principal office address: 1601 Washington Avenue, 8th Floor, Miami Beach, Florida 33139						
3. The mailing	address (if different):		_			
4. Date of inco	prporation/qualification: 2/4/02 Document number: P02000012356		<u>-</u>			
	nd street address of the current registered agent and registered office on file with the artment of State:					
	Shelly L. Rubin _					
	760 NW 107th Avenue, Suite 300					
	Miami, Florida 33172					
6. The name a changed):	and street address of the new registered agent (if changed) and /or registered offic Shelly L. Rubin		0			
	1601 Washington Avenue, 8th Floor	102 103	02 NOV 25			
	(P.O. Box or personal mailbox NOT acceptable)	EE E	\geq	7		
	Miami Beach, Florida 33139	255 755 755 755 755 755 755 755 755 755		דוריי		
agent, as chang	ress of its registered office and the street address of the business office of its registered will be departed.	Es.	PM 5:			
Such change was authorized by	As authorized by resolution duly adopted by its board of directors or by an officer sine board, or the corporation has been notified in writing of the change.		07			
/ V	Shelly L. Rubin, Vice President	ightharpoons				
	er, chairman or vice chairman of the board) (Printed or typed name and title)					
I hereby accep I further agree performance p registered agr office addless,	of the appointment as registered agent and agree to act in this capacity. Ito comply with the provisions of all statutes relative to the proper and complete If my duties, and I am familiar with and accept the obligation of my position as Int. Or, if this document is being filed merely to reflect a change in the registered I hereby confirm that the corporation has been notified in writing of this change.					
NU	-11/21/02					
	(Date)					
If signing on beha	alf of an entity:					
	(Typed or Printed Name) (Capacity)					

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

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

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