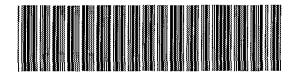
P9400007233

(Requestor's Name)						
(Address)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Business Chicky Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



100009181011

11/25/02--01003--011 **3500.DC

02 NOV 25 PM 1: 28 SECRETARY OF STATE

20 chang

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Lennar Northeast Holdings, Inc.
(Name of corporation)
DOCUMENT NUMBER: P94000072238
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Shelly L. Rubin
(Name of person)
c/o LNR Property Corporation
(Name of firm/company)
1601 Washington Avenue, 8th Floor
(Address)
Miami Beach, Florida 33139
(City/state and zip code)
For further information concerning this matter, please call:
Zena M. Dickstein at (305) 485-2098
Zena M. Dickstein at (305) 485-2098 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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

7

Pursuant to th	e provisions of sections 6	07.0502, 617.0502	, 607.1508, or 617.150	98, Florida Statutes,
	of <mark>change is submitted for a</mark>	a corporation orga	nized under the laws of	the State of
Florida	in order to change	its registered offic	e or registered agent,	or both, in the State
of Florida.			•	** AF NEW YORK
1. The name of	the corporation: Lennar N	Northeast Holdings, I	nc. 	
2. The principa	l office address: 1601 Wa	shington Avenue, 8tl	n Floor, Miami Beach, Fl	orida 33139
3. The mailing	address (if different):			
4. Date of inco	rporation/qualification:	10/3/94	Document number:	P94000072238
	nd street address of the curr artment of State: Shelly L. Rubin	rent registered agen	t and registered office of	on file with the
				— 鼍
	760 NW 107th Avenue, S	uite 300		— SS
	Miami, Florida 33172	<u></u>		
6. The name a changed):	nd street address of the n	ew registered agen	t (if changed) and /or	registered office (
•		9th Floor		
	1601 Washington Avenue,	or personal mailbox NOT a	cceptable)	
	Miami Beach, Florida 3313		. ,	
The street addr	ress of its registered office ged will be identical.	and the street addr	ess of the business off	ice of its registered
Such change wanthonized by t	as authorized by resolution he board, or the corporation	n duly adopted by i	its board of directors of in writing of the char	r by an officer so age.
Signature of an office	r chairman or vice chairman of the bo		 Rubin, Vice President (Printed or typed name and life 	
I hereby accept I further agree performance of registered ager office address,	t the appointment as regis, to comply with the provise f my dulies, and I am fami at. Or, if this document is I herafy confirm that the	tered agent and ag ions of all statutes liar with and accep being filed merely corporation has be	ree to act in this capac relative to the proper of the obligation of my to reflect a change in en notified in writing o	ritv
- / (Signature of Registered Agent)		11/01/02 (Date)	
If signing on beha	\sim 1			
	Typed or Printed Name)		(Capacity)	
1	There or I import setting)		(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

