

Division of Corporations

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P96000072519

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)922-4000

From: Account Name : FIELDSTONE LESTER SHEAR & DENBERG
Account Number : I19990000180
Phone : (305)357-5775
Fax Number : (305)357-5776

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

MZM RESIDENCES/INVESTMENTS, INC.

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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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : MZM Residences/Investments, Inc.
2. The mailing address of the corporation : 445 Grand Bay Drive, Suite PH1, Key Biscayne,
Florida 33149
3. Date of incorporation/qualification: 08/30/1996 Document number: P96000072519
4. The name and address of the current registered agent and office:

Joel D. Maser1221 Brickell AvenueMiami, FL 33131

5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P. O. Box Not Acceptable)

Ronald R. Fieldstone201 Alhambra Circle, Suite 601Coral Gables, FL 33134

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.

(Signature of an officer, chairman or vice chairman of the board)

9-22-2000

(Date)

Martin Z. Margulies, Director

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)
Ronald R. Fieldstone

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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