I AW OFFICES

JAMES L. CASE.

James L. Case, J. A.

SUITE 102

2810 EAST OAKLAND PARK BOULEVARD

RT LADERDAGE, LIGRIDANS 306

March 11, 1998

(954) 563-1000 FAX (954) 565-2047

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RE: PINE PLAZA OF SUNRISE, INC.

Dear Sir:

Enclosed please find a Change of Registered Office Cor Registered Agent Form to be filed on behalf of the above referenced corporation, together with a check in the amount of \$35000 representing the filing fee.

Please amend you records at your earliest opportunity to reflect the change.

Very truly yours

KAREN BLOCK, Legal Assistant

KB Encl. 98-17-853

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Charter No: P98000022564 Date Filed: March 10, 1998

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

To the Secretary of State of the State of Florida.

Pursuant to the provisions of Sections 607.0501 and 607.0502, Florida Statutes, the undersigned corporation, organized under the Laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent, in the State of Florida.

- 1. The name of the corporation is PINE PLAZA OF SUNRISE, INC., a Florida Corporation.
- 2. The name and address of its present registered agent is: Filings, Inc.

3732 N.W. 16th Street Fort Lauderdale, Florida 33311

3. The <u>name and street address</u> to which its registered agent is to be changed is: (P.O. BOX NOT ACCEPTABLE)

James L. Case Suite 102

2810 East Oakland Park Boulevard Fort Lauderdale, FL 33306

4. The street address of its registered office and the street address of the business office of its registered agent, as dranged, are identical.

5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation some authorized by the board of directors.

Signature:

James L. Case, Fresident

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 UNDER SECTION 607.0505, FLORIDA STATUTES.

Please Print/Type Name: JAMES L. CASE	
Signature:	
(Agent)	
Dated:	