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TRANSMITTAL LETTER

Division of Corporations SUBJECT: LNR 99 Fund I MM, Inc. (Name of corporation) DOCUMENT NUMBER: P98000073337 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 (Area code & daytime telephone number) (Name of person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations 409 E. Gaines Street P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32399

CR2E045(07/02)

TO:

Amendment Section

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

Pursuant to the	he provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flo	orida Statutes,
this statement o Florida	of change is submitted for a corporation organized under the laws of the St in order to change its registered office or registered agent, or bot	•
of Florida.		
1. The name of	f the corporation: LNR 99 Fund I MM, Inc.	
2. The principa	al office address: 1601 Washington Avenue, 8th Floor, Miami Beach, Florida 3	3139
3. The mailing	g address (if different):	
4. Date of incom	prporation/qualification: 8/14/98 Document number: P980	000073337
5. The name an	nd street address of the current registered agent and registered office on file partment of State: Shelly L. Rubin	with the
	760 NW 107th Avenue, Suite 300	
	Miami, Florida 33172	02 K SEC
6. The name a changed):	and street address of the new registered agent (if changed) and /or registered	02 NOV.25 SECREMARY FALLAHESSSE
- ^	Shelly L. Rubin	T = 3
	1601 Washington Avenue, 8th Floor	5.7 S.17
	(P.O. Box or personal mailbox NOT acceptable) Miami Beach, Florida 33139	24 ATE ARIDA
	ress of its registered office and the street address of the business office of ged will be identical.	
Such change wanthorized by	was authorized by resolution duly adopted by its board of directors or by a the board, or the corporation has been notified in writing of the change.	n officer so
Nea	Shelly L. Rubin, Vice President (Printed or typed name and title)	
I hereby accep	pt the appointment as registered agent and agree to act in this capacity, e to comply with the provisions of all statutes relative to the proper and coff my duites, and I am familiar with and accept the obligation of my positent. Or, fif this document is being filed merely to reflect a change in the rest, I hereby confirm that the corporation has been notified in writing of this	omplete ion as egistered s change.
	(Signature of Registered Agent) (Date)	
	(Typed or Printed Name) (Canacity)	

Salt.