

A93000000884

Requestor's Name

B. A. King
9902 Bessie Clemson Rd.
Union Bridge, MD 21791

City/State/Zip

Phone #

400002256274--4
-08/04/97--01067--008
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

FILED
97 AUG -4 AM 11:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
Profit	
NonProfit	
Limited Liability	
Domestication	
Other	

AMENDMENTS	
Amendment	
Resignation of R.A., Officer/ Director	
Change of Registered Agent	
Dissolution/Withdrawal	
Merger	

OTHER FILINGS	
Annual Report	
Fictitious Name	
Name Reservation	

REGISTRATION/ QUALIFICATION	
Foreign	
Limited Partnership	
Reinstatement	
Trademark	
Other	

RA Chg.

VS AUG 14 1997

Examiner's Initials	
---------------------	--

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

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership 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 King Family Limited Partnership
Name of the limited partnership

2. 08/30/93
Date of filing/registration in Florida

3. A93000000884
Document number assigned

4. The name and address of the present registered agent and office:

James P. Bridy-Registered Agent
73 SW Flagler Ave.,
Stuart, FL 34994

5. The name and street address of the successor registered agent and office: (P.O. Box not acceptable)

Robert J. Haas-Registered Agent
518 S. Riverpoint Dr.,
Stuart, FL 34994

Such change was authorized by the general partners.

[Signature]
Signature of General Partner

9 Jul 97
Date

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

[Signature]
Registered Agent signature

7/16/97
Date

Filing Fee: \$35.00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

97 AUG-4 AM 11:23
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA