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To:

Division of Corporations

Fax Number : (850)205-0380

Account Name

: GREENSPOON MARDER, P.A.

Account Number : I19990000182

(954)491-1120

Phone Fax Number

: (954)267-8013

## REGISTERED AGENT CHANGE

TRUST INVESTORS, LTD.

Certificate of Status	0
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T-257 P002/002 F-363

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

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

, TRUST INVESTORS, LTD.	· ,	
Name of Limited Partnership or Limite	d Liability Limited Partnership	
<sub>2.</sub> June 4, 1996	<sub>3.</sub> A96000001050	
Date of filing/registration in Florida	Florida document number	
4. The name of the registered agent and the registered offi Department of State:	ice address as shown on the records of the Florida	
ALAN B. COHN		
Name		
c/o Abrams, Anton,	ETAL	
Address		
2021 Tyler Street, Hollywood, FL 33022		
City, State and	d Zip	
5. The name and Florida street address of the new register	ed agent and/or office:	
ALAN B. COHN	<b>4</b> 0	
Name	PEC 7	
100 West Cypress Creek Road, Suite 700 层常 复 ,		
Florida street address (P.O.		
Fort Lauderdale	er 333309 - 85~ (T)	
City, State and	u ZiD - ' '	
6. Such change(s) is/are effective when filed by the Florida Department of State.		
Se de la del		
Signature of General Partners		
I hereby accept the appointment as registered agent and a	man to and to this named to the other warms to	
comply with the provisions of all gottles selective to the pr	oper and complete performance of my duties,	
and I am familiar with an accept the optigations of my position as registered agent.		
- Och I		
Signature of Registered Agom		
Filing Fee: \$35.00		
Certified Copy (optional): \$52.50		