## CAPITAL CONNECKUNAN 417 E. Virginia Street, Suite 1 • Talkhasse I. Florida . (850) 224-8870 • 1-800-342-8063 • Tal (851) 2... (850)

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## 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	പ്രത്യാല
partnership submits the following statement in order to change its registered office or registered or both, in the state of Florida.	200 CO
· · · · · · · · · · · · · · · · · · ·	
Name of the limited partnership	PH 12: 50
2. 4/22/97 3. A9700000882	R T
Date of filing/registration in Florida Document number assigned	733
4. The name of the registered agent and the registered office address as shown on the records of the Department of State:	: Florida
EDWARD W. EASTON Name	
300 GRECO AVENUE	
Address	
CORAL GABLES FL 33146	
City, State and Zip	
5. The name and address of the new registered agent and/or office:	
MICHAEL B. WERNER Name	
1111 LINCOLN ROAD #800	-
Florida street address (P.O. Box not acceptable)	·
MIAMI BEACH FL 33139	
City, State and Zip  6. Such change(s) was/were authorized by the general partners. 200 SOUTHEAST FIRST STREET, INC.	
Don Day	
Signature of General Partner, President Michael B. Werner, President I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree with the provisions of all statutes relative to the proper and complete performance of my duties, familiar with and accept the obligations of my position as registered agent. Or, if this document is merely to reflect a change in the registered office address, I hereby confirm that the limited partner been notified in writing of this change.	being filed
Signature of Registered Agent MICHAEL B. WERNER	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00

Ву: