

CT CORPORATION SYSTEM

A98000001129 (2)

CORPORATION(S) NAME

A98-1129 R/A change 9/3

1) Aventura Land Investments, L.P.

~~_____~~

02 SEP -3 PM 1:16
RECEIVED
TALLAHASSEE FLORIDA

FILED

MJM

02 SEP -3 AM 11:09
RECEIVED

- Profit
- Nonprofit
- Foreign
- Limited Partnership
- LLC
- Certified Copy
- Call When Ready
- Walk In
- Mail Out
- Amendment
- Dissolution/Withdrawal
- Reinstatement
- Annual Report
- Name Registration
- Fictitious Name
- Photocopies
- Call If Problem
- Will Wait
- Merger
- Mark
- Other
- Change of RA
- UCC
- CUS
- After 4:30
- Pick Up

Name _____

Availability _____

Document _____

Examiner _____

Updater _____

Verifier _____

W.P. Verifier _____

9/3/02

Order#: 5569124

000007476180--0

-09/03/02--01057--016

Ref#: *****35.00 *****35.00

Amount: \$ _____

660 East Jefferson Street
 Tallahassee, FL 32301
 Tel. 850 222 1092
 Fax 850 222 7615

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 submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Aventura Land Investments, L.P.
Name of the limited partnership
2. May 5, 1998
Date of filing/registration in Florida
3. A98000001129
Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Rudolph Tessler
Name

5025 Collins Avenue, #601
Address

Miami Beach, Florida 33140
City, State and Zip

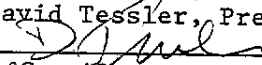
5. The name and address of the new registered agent and/or office:

CT Corporation System
Name

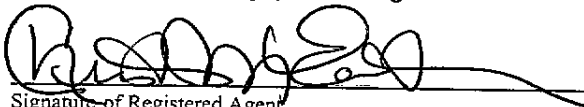
1200 South Pine Island Road
Florida street address (P.O. Box **not** acceptable)

Plantation FL 33324
City, State and Zip

6. Such change(s) was/were authorized by the general partners.
Aventura Land Management, Inc., General Partner
By: David Tessler, President


Signature of General Partner

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 obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.


Signature of Registered Agent

Christine M. Eastwine
Assistant Secretary

**Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**

02 SEP -3 PM 1:16
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA