A98000001597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

S. HAWKES

MAY 17 2010

EXAMINER

CORPORATION SERVICE COMPANY®

ACCOUNT NO. : I20000000195

REFERENCE : 382901 7775081

AUTHORIZATION :

COST LIMIT : $ 35.00

ORDER DATE : May 13, 2010

ORDER TIME : 9:46 AM

ORDER NO. : 382901-151

CUSTOMER NO: 7775081

CHANGE OF AGENT

NAME: WINDROSE WELLINGTON
PROPERTIES, LTD.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XXX ____ PLAIN STAMPED COPY

CONTACT PERSON: Elizabeth Dawson -- EXT# 3191

EXAMINER: _____

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.

1. WINDROSE WELLINGTON PROPERTIES, LTD.
Name of Limited Partnership or Limited Liability Limited Partnership

2. June 29, 1998
Date of filing/registration in Florida

3. A98000001597
Florida document number

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

C T Corporation System
Name

1200 South Pine Island Road
Address

Plantation, FL 33324
City, State and Zip

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

Corporation Service Company
Name

1201 Hays Street
Florida street address (P.O. Box not acceptable)

Tallahassee FL 32301
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Signature of General Partner
Blanca Lozada, Authorized Person on behalf of WMPT Wellington Management, L.L.C., its 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 an accept the obligations of my position as registered agent.

Corporation Service Company
By:
Signature of Registered Agent Grace E. Kirby, Asst. VP

Filing Fee: $35.00
Certified Copy (optional): $52.50