B98000000721 SREG Operating Limited Partnership Requester's Name Host Sheridan St., Ste 200 Address Hostowood, Fl. 33021 City/State/Zip Phone

Office Use Only

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

1	
(Corporation Name)	(Document #) 501001101365-3
2.	-08/14/0201039022 *****35.00 *****35.00
(Corporation Name)	(Document #)
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NEW FILINGS	
NEW FILINGS	AMENDMENTS S
Profit	Amendment
Not for Profit Limited Liability	Resignation of R.A., Officer/Director
Name Domestication	Change of Registered Agent Dissolution/Withdrawal
Availability Other	Merger
Pocume THER FILINGS	REGISTRATION/QUALIFICATION
Examiner	_
Updater Annual Report Fictitious Name	Foreign Limited Partnership
Undaler	Reinstatement
Verifyer DCC	Trademark
Actino dedgement DCC	Other
W. P. Verifyer DCC	Examiner's Initials
CR2F031(7/97)	Danniner 5 Initials

1398000000721

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	SREG OPERATION	NG LIMITED PARTI	VERSHIP	
		Name of the limited	l partnership	
2.	12/29/98	3.	B9800000721	
	Date of filing/registration in Florida		Document number assigned	
4.	The name of the registered agent and Department of State:	the registered of		ecords of the Florida
		Name	1.	· s
	300 Ually	ywood Way		
	300 11511	Address		
		1 mucos		
	Hollywood	d, Florida 330	21	
		City, State ar	d Zip	
	Such change(s) was/were authorized to SWERDLOW REAL ESTATE GROUP, INC.	R. Stotzer, Esc Name ridan Street, St reet address (P.O. B d, FL City, State an by the general par	nite 200 ox not acceptable) 33021 d Zip thers.	ECKETARY OF STATE LLAHASSEE, FLORIDA
Sign	nature of General Partner, Theodore R.	Stotzer, Executi	ve Vice President	. 4
wit. fan mei bee	ereby accept the appointment as registed the provisions of all statutes relative initiar with and accept the obligations of the register of the notified in writing of this change. Inature of Registered Agent, Theodore &.	ve to the proper of my position as in red office address	and complete performance of registered agent. Or. if this do	my duties, and I am cument is being filed

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