

MO20000003060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

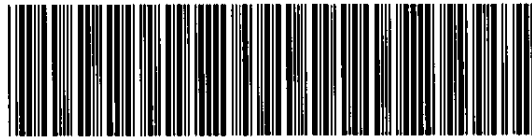
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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09 MAR 26 AM 9: 15  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

MAR 27 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 931895 4346784  
AUTHORIZATION : *[Signature]*  
COST LIMIT : \$ 25.00

ORDER DATE : March 20, 2009  
ORDER TIME : 3:14 PM  
ORDER NO. : 931895-116  
CUSTOMER NO: 4346784

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

CHANGE OF AGENT

NAME: SEMINOLE PROPERTIES RETAIL,  
LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace

EXAMINER'S INITIALS: \_\_\_\_\_

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: SEMINOLE PROPERTIES RETAIL, LLC

2. (a) Principal office address of limited liability company: 6300 Stirling Road  
*(Note: MUST BE STREET ADDRESS)* Attn: Legal Department  
Hollywood, FL 33024

(b) Mailing address of limited liability company: 6300 Stirling Road  
*(Note: MAY BE POST OFFICE BOX)* Attn: Legal Department  
Hollywood, FL 33024

11-18-2002  
3. Date of filing/registration in Florida

M02000003060  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Agent: C T Corporation System  
Registered Office Address: 1200 South Pine Island Road  
Plantation, FL 33324

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
NEW Registered Agent: Corporation Service Company  
NEW Registered Office Address: 1201 Hays Street  
*(MUST BE FLORIDA STREET ADDRESS)* Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Maureen Cullen  
(Signature of a member or authorized representative of a member)

Maureen Cullen, Authorized Person  
(Printed or typed name of signee)

*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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

By: Sylvia Queppet  
(Signature of Registered Agent) Sylvia Queppet, Assistant VP

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00

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