

ACCOUNT NO. : 072100000032

REFERENCE : 980722

4321791

AUTHORIZATION :

COST LIMIT :

\$ 35.00

ORDER DATE : January 29, 2001

ORDER TIME : 12:45 PM

ORDER NO. : 980722

CUSTOMER NO: 4321791

600003656196--1

CUSTOMER:

Ms. Lesley V. Benjamin

The Related Companies, Inc. 625 Madison Avenue, 9th Floor

New York, NY 10022

CHANGE OF AGENT

NAME:

CITYPLACE CULTURAL ART CENTER,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson -- EXT# 1155

EXAMINER:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State ofFlorida
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
The name of the corporation is: CITYPLACE CULTURAL ARTS CENTER, INC.
2. The mailing address of the corporation is:
3. Date of incorporation/qualification: 04/11/2000 Document number: N00000002400
1. The name and address of the current registered agent and office:
Lynda J. Harris, Esq.
222 Lakeview Avenue, Suire 1400
West Palm Beach, FL 33401 The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
(Signature of an officer, chairman or vice chairman of the board) (Date)
Applia S. Burger, vice Pizesident. (Printed or upped name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. 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 obligation of my position as registered agent.
Sy: Cocol Color Q. 6-2001 (Signature of Registered Agent) (Date)
f signing on behalf of an entity:
Carol K. Dolor, Asst. VP (Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2EO45(7/97)