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CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 850-222-1092

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 5, 2000

CT CORPORATION SYSTEM

SUBJECT: RELATED RONEY PLAZA ASSOCIATES, LTD.

Ref. Number: A17693

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We have received your document for RELATED RONEY PLAZA ASSOCIATES, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached application to change the Registered Agentor Registered Office, the fee is \$35.00, an application for refund has been submitted for \$17.50, the overpayment, please allow 90 days.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 700A00025035

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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. Related Roney Plaza Associates, Ltd. Name of the limited partnership 3. A17693 6/21/84 Document number assigned Date of filing/registration in Florida 4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Jorge M. Perez 2828 Coral Way, Penthouse Suite Address Miami, Fl 32301 City, State and Zip 5. The name and address of the new registered agent and/or office: C T Corporation System 1200 South Pine Island Road Florida street address (P.O. Box not acceptable) Plantation, FL 33324 City, State and Aup 6. Such change(s) was/were authorized by the general partners. Related Roney Plaza, Inc. 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. Jonathan R. Giddings Assistant Secretary gnature of Registered Agent Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Filing Fee: \$35.00

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CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 850-222-1092

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 5, 2000

CT CORPORATION SYSTEM

SUBJECT: RELATED RONEY PLAZA ASSOCIATES, LTD. Ref. Number: A17693

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Letter Number: 700A00025035

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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, so both, in the state of Florida. |
|--|
| Related Roney Plaza Associates, Ltd. |
| Name of the limited partnership |
| 2 6/21/84 3 A17693 |
| 2 6/21/84 Date of filing/registration in Florida Document number assigned 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: Jorge M. Perez |
| Name |
| 2828 Coral Way, Penthouse Suite Address |
| Miami, Fl 32301 |
| City, State and Zip |
| 5. The name and address of the new registered agent and/or office: C T Corporation System Name |
| 1200 South-Pine Island Road |
| Florida street address (P.O. Box not acceptable) |
| Plantation, FL 33324 City, State and Zup |
| 6. Such change(s) was/were authorized by the general partners. Related Roney Plaza, Inc. |
| 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. |
| Jonathan R. Giddings Assistant Secretary |
| Signature of Registered Agent |
| |
| Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 |

INHS04(9/97)