

**CFRA, LLC**  
**Registered Agent Services**  
**A Subsidiary of Carlton Fields**

ONE HARBOUR PLACE, 5<sup>TH</sup> FLOOR  
777 S. HARBOUR ISLAND BOULEVARD  
TAMPA, FLORIDA 33602-5730

MAILING ADDRESS:  
P. O. BOX 3239  
TAMPA, FLORIDA 33601-3239  
TEL (813) 223-7000 FAX (813) 229-4133

September 19, 2002

Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32314

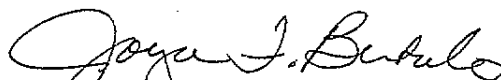
Re: Registered Agent Statements of Change

900008072569--1  
-09/25/02--01034--004  
\*\*\*\*130.00 \*\*\*\*35.00

Gentlemen:

Please find enclosed statements of change for the registered agents of Empire Concepts, Inc.; Empire South Florida Properties, LLC; Empire Florida Management, Inc.; and Empire Florida Properties, Ltd. Also enclosed is Carlton Fields' Check No. 300083 in the amount of \$130.00 for the filing fee.

Very truly yours,



Joyce F. Bentubo  
Administrative Assistant

jfb  
Enclosures

TALLAHASSEE, FLORIDA

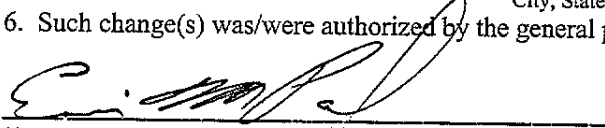
02 SEP 26 AM 10:18

for  
rest

**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. Empire Florida Properties, Ltd.  
Name of the limited partnership
2. 7/14/2000  
Date of filing/registration in Florida
3. A00000001108  
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:  
Carlton, Fields Ward Emmanuel Smith  
c/o Lavinia James Vaughn  
777 S. Harbour Island Blvd.  
Address  
Tampa, FL 33458  
City, State and Zip
5. The name and address of the new registered agent and/or office:  
CFRA, LLC  
Name  
777 S. Harbour Island Blvd.  
Florida street address (P.O. Box not acceptable)  
Tampa FL 33602-5730  
City, State and Zip
6. Such change(s) was/were authorized by the general partners.

  
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.*

  
Signature of Registered Agent

Peter J. Winders  
Vice President

9/17/02

**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**