

A00000001409

JOSEPH H. KATZ, P.A. BRYAN & SON
ATTORNEYS AND COUNSELORS AT LAW
www.katzlaw.com

Orlando Office

Suite 900
111 North Orange Avenue
ORLANDO, FL 32801
(407) 841-7100
fax (407) 648-0660

Tallahassee Office

12th Floor
106 East College Avenue
TALLAHASSEE, FL 32301
(850) 224-9634
fax (850) 222-0103

Miami Office

Suite 409
2999 NE 191st Street
AVENTURA, FL 33180
(305) 932-0996
fax (305) 932-0972

Washington, DC Office

Suite 750
801 Pennsylvania Avenue, NW
WASHINGTON, D.C. 20004
(202) 393-1132
fax (202) 624-0659

Reply to Tallahassee

E-mail: chris@katzlaw.com

November 6, 2000

FILED
00 NOV -6 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VIA HAND DELIVERY

Florida Department of State
Division of Corporations
Tallahassee, Florida 32314

Re: *Registered Agent Designation Application*

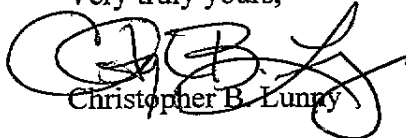
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*****35.00 *****35.00

Dear Sir or Madam:

We enclose herewith an original and one copy of Change of Registered Agent form, along with the filing fee of \$35.00. Please date-stamp one copy and notify our office when the copy can be picked up.

Thank you for your cooperation. If you have any questions, please contact us.

Very truly yours,


Christopher B. Lunny

CBL:mr

cc: Gerald C. Marshall

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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NO FILING FEE
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

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Mr
4/6

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 organized under the laws of the state of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. The Gerald C. Marshall Family Limited Partnership
Name of the limited partnership

2. September 11, 2000 3. A00000001409
Date of filing/registration in Florida Document number assigned

4. The name and address of the present registered agent and office:

Richard S. Lehman
2600 N. Military Trail, Suite 270
Boca Raton, FL 33431

5. The name and street address of the successor registered agent and office: (P.O. Box not acceptable)

Christopher B. Lunny, Esquire
106 E. College Avenue, Suite 1200
Tallahassee, FL 32301

Such change was authorized by the general partners.

[Signature]
Signature of General Partner

10/30/00
Date

Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, 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 obligation of my position as registered agent.

[Signature]
Registered Agent signature

11/6/2000
Date

Filing Fee: \$35.00

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