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## SCHROEDER AND LARCHE, P.A.

ATTORNEYS AT LAW
120 EAST PALMETTO PARK ROAD
SUITE 150
BOCA RATON, FLORIDA 33432

MICHAEL A. SCHROEDER W. LAWRENCE LARCHE\* NANCY S. HARRISON\*\* TELEPHONE (561) 241-0300 FACSIMILE (561) 241-0798

\*FLORIDA BAR BOARD CERTIFIED WILLS TRUSTS AND ESTATES LAWYER \*\*ALSO ADMITTED IN MICHIGAN

mschroeder@schroederlarche.com wilarche@schroederlarche.com nharrison@schroederlarche.com

May 8, 2003

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re:

Several entities filings

## Gentlemen:

Enclosed you will find our check in the amount of \$140.00 to cover the following enclosed original filings:

1. Limited Partnership Statement of Change of Registered Office or Registered Agent, or Both for London Associates, Ltd;

2. Statement of Change of Registered Office or Registered Agent or Both Corporations for London Associates, Inc.;

3. Statement of Change of Registered Office or Registered Agent for Both for Corporations for HUB Partners, Inc.; and

4. Limited Partnership Statement of Change of Registered Office or Registered Agent, or Both for TAB 200, Ltd;

Thank you for your attention in this regard.

Very truly yours,

JUDITH LYNN JOKIS

SENIOR REAL ESTATE PARALEGAL

/ili

Enclosures

## 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.

I. TAB 200, LTD.		
	Name of the limited partnership	
2. 5/16/2001 Date of filing/registr	ation in Florida  3. A0100000694 Document number assig	ned
4. The name of the regis	tered agent and the registered office address as shown on th	e records of the Florida
Department of State:	MICHAEL A. SCHROEDER, ESQ.	
	SCHROEDER AND LARCHE, P.A. 2255 GLADES ROAD, SUITE 319ATRIUM	
	Address BOCA RATON, FLORIDA 33431	•
-	City, State and Zip	
5. The name and address ———————————————————————————————————	of the new registered agent and/or office:  NO NEW NAME - ADDRESS CHANGE ONLY  Name  SUITE 150, 120 EAST PALMETTO PARK ROAD  Florida street address (P.O. Box not acceptable)  BOCA RATON  EL 33432	FILED  03 MAY 12 AN II: 31  SECRETARY OF STATE TALLAHASSEE, FLORIDA
5. Such change(s) was/w TAB PROPERTIES, I		<u>Ω</u> Ω
Signature of General Partner BY: CHARLES B. L. I hereby accept the appoint with the provisions of all familiar with and accept to reflect a chang seen notified in writing of	ADD, JR. Vice Weslerd Intment as registered agent and agree to act in this capacity. It statutes relative to the proper and complete performance the obligations of my position as registered agent. Or, if this is in the registered office address, I hereby confirm that the this change.	I further agree to comp of my duties, and I a s document is being file limited partnership h

MICHAEL A. SCHROEDER, ESQ.

Signature of Registered Agent

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