

A01000001010

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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REGISTERED AGENT CHANGE

DECADE TAMPA OFFICE PARTNERS LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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11 DEC 29 PM 3:00

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DECADE TAMPA OFFICE PARTNERS LIMITED PARTNERSHIP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A01000001010

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Michael Sweet
Contact Person
Decade Group
Firm/Company
13555 BISHOPS COURT SUITE 345
Address
BROOKFIELD WI 53005
City, State and Zip Code
msweet@decadegroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Sweet at (262) 797-9215
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

INHS04 (01/06)

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. DECADE TAMPA OFFICE PARTNERS LIMITED PARTNERSHIP
Name of Limited Partnership or Limited Liability Limited Partnership
2. 07/25/2001 3. A01000001010
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

NAPLES-LAWDOCK, INC.

Name

1395 PANTHER LANE SUITE 300

Address

NAPLES FL 34109 US

City, State and Zip

5. The name and Florida street 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 Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.


Signature of General Partner

Michael Sweet, Secretary of JK Investments of

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.

Rebecca Barth
Signature of Registered Agent

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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TALLAHASSEE, FLORIDA

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