## A0100001299

(Requestor's Name)					
(Ad	dress)				
(4.1	-1				
(Ad	dress)				
(Cit	y/State/Zip/Phone	<del>•</del> #)			
_	_	_			
☐ PICK-UP	☐ WAIT	MAIL			
	- <del></del>				
(Bu	siness Entity Nan	ne)			
(Do	cument Number)				
•	·				
Certified Copies	Certificates	of Status			
Special Instructions to	Filing Officer:	/.			
l 🕺	( )	/			
<u> </u>	) ]	/			
. /	11	\			
	, / \				
	<b>√</b> ,				
\/	Office Use Onl				



600092294226

THAR 26 PH 1:21
SECRETARY OF STATE
ALLAHASSEE, FLORIGA

07 MAR 26 AM 10: 51
DEPARTMENT OF STATE
DIVISION OF CORPORATION
DIVISION OF SEE, FLORIDA

ECEIVE



ACCOUNT NO. : 072100000032

REFERENCE: 808068 7452534

AUTHORIZATION

COST LIMIT

ORDER DATE: March 19, 2007

ORDER TIME : 10:22 AM

ORDER NO. : 808068-335

CUSTOMER NO: 7452534

CHANGE OF AGENT

NAME: TUCSON MOB PARTNERS, LTD.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace -- EXT# 2928

EXAMINER:

## 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.

Name of Limited Partnership or Limited Liability Limited Partnership  2. September 20, 2001  Date of filling/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 Florid Department of State:  Amy J. Patterson  Name  420 South Orange Avenue, Suite 500  Address  Orlando, FL 32801  City, State and Zip  5. The name and Florida street address of the new registered agent and/or office:  Corporation Service Company  Name  1201 Hays Street  Florida street address (P.O. Box not acceptable)  Tallahassee  FL 32301  City, State and Zip  6. Such change(s) is/are effective when filed by the Florida Department of State.  Signature of General Partner  Aut Mori 12ed Person  of Hup DAS Tranche   GP, LUC Gentual Partner  Aut Mori 12ed Person  of Hup DAS Tranche   GP, LUC Gentual Partner  and I am familiar with an accept the obligations of my position as registered agent.  Corporation Service Company  By:  Signature of Registered Agensylvia J. Queppet, Asst. VP	1. TUCSON MOI	B PARTNERS, LTD.				
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 Florid Department of State:  Amy J. Patterson  Name  420 South Orange Avenue, Suite 500  Address  Orlando, FL 32801  City, State and Zip  5. The name and Florida street address of the new registered agent and/or office:  Corporation Service Company  Name  1201 Hays Street  Florida street address (P.O. Box not acceptable)  Tallahassee  FL 32301  City, State and Zip  6. Such change(s) is/are effective when filed by the Florida Department of State.  Signature of General Partner  Author 12ed Person  of Hue pas Tranche I GP, UC, Gennal Partner  I nereoy accept the appointment as registered ugent 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 fully a complete company  By:  Superbure of Periotropila agent  Superbure of Periotropila a		Name of Limited Partnership or Lim	ited Liability I	Limited Partner	ship	
4. The name of the registered agent and the registered office address as shown on the records of the Florid Department of State:    Amy J. Patterson	2. September 20, 2001		3. A01000001299			
Department of State:    Amy J. Patterson	Date of filing/registration in Florida			Florida document number		
Name  420 South Orange Avenue, Suite 500  Address  Orlando, FL 32801  City, State and Zip  5. The name and Florida street address of the new registered agent and/or office:  Corporation Service Company  Name  1201 Hays Street  Florida street address (P.O. Box not acceptable)  Tallahassee  FL 32301  City, State and Zip  6. Such change(s) is/are effective when filed by the Florida Department of State.  Signature of General Partner  Author 12ed Person of Har Das Tranche I GP, LiC, Gential Partner a rerevy accept tine appointment as registered ugent 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 an accept the obligations of my position as registered agent.  By:  Signature of Registered agent			office address	as shown on the	e records of the Florida	
Address  Orlando, FL 32801  City, State and Zip  5. The name and Florida street address of the new registered agent and/or office:  Corporation Service Company  Name  1201 Hays Street  Florida street address (P.O. Box not acceptable)  Tallahassee  FL 32301  City, State and Zip  6. Such change(s) is/are effective when filed by the Florida Department of State.  Signature of General Partner  AMMOR 12ed Person of Hup pas Tranche   GP, UC Genual Partner are 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 an accept the obligations of my position as registered agent.  Signature of Registered agent.  Signature of Registered agent.		Amy J. Patterson			700	
5. The name and Florida street address of the new registered agent and/or office:    Corporation Service Company		Nan	ne			
5. The name and Florida street address of the new registered agent and/or office:    Corporation Service Company		420 South Orange Avenue, Suit	te 500		語	
5. The name and Florida street address of the new registered agent and/or office:    Corporation Service Company		Addr	ess		AS AS	
5. The name and Florida street address of the new registered agent and/or office:    Corporation Service Company		Orlando, FL 32801			SEC	
Corporation Service Company  Name  1201 Hays Street  Florida street address (P.O. Box not acceptable)  Tallahassee  FL 32301  City, State and Zip  6. Such change(s) is/are effective when filed by the Florida Department of State.  Signature of General Partner  Authorized Person of Happas Tranchel GP, LiC, General Partner in nereoy 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 an accept the obligations of my position as registered agent.  By:  Signature of Registered agent		City, State	and Zip		70	
Name    1201 Hays Street	5. The name and l	Florida street address of the new regi	stered agent an	d/or office:	ORIG	
Florida street address (P.O. Box not acceptable)  Tallahassee  FL 32301  City, State and Zip  6. Such change(s) is/are effective when filed by the Florida Department of State.  Signature of General Partner  Au Mor i Ze cl Person of Hup DAS Tranche I GP, LiC Gennial Partner in nereoy 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 an accept the obligations of my position as registered agent.  By:  Signature of Registered agent		Corporation Service Company			>	
Florida street address (P.O. Box not acceptable)  Tallahassee  FL 32301  City, State and Zip  6. Such change(s) is/are effective when filed by the Florida Department of State.  Signature of General Partner  AU MON 12ed Person of Hur DAS Tranche I GP, Lic, General Partner in nereby 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 an accept the obligations of my position as registered agent.  Corporation Service Company  By:  Signature of Registered agent		Nam	ne		-	
City, State and Zip  6. Such change(s) is/are effective when filed by the Florida Department of State.  Signature of General Partner  AUMONIZE of Person of Hup DAS Tranche I GP, LLC, Gennal Partner in nereoy 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 an accept the obligations of my position as registered agent.  By:  Signature of Registered agent		1201 Hays Street				
City, State and Zip  6. Such change(s) is/are effective when filed by the Florida Department of State.  Signature of General Partner  AUMOS 12ed Person of Her Das Tranche I GP, Lie General Partner  I nereoy 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 an accept the obligations of my position as registered agent.  By:  Signature of Registered Agent A		Florida street address (P.	O. Box not acc	eptable)	<b>-</b> ,	
City, State and Zip  6. Such change(s) is/are effective when filed by the Florida Department of State.  Signature of General Partner  AUMON 12ed Person of Hip DAS Tranche I GP, Lie, Gennal Partner  I nereoy 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 an accept the obligations of my position as registered agent.  By:  Signature of Registered agent		Tallahassee	FI	32301		
Signature of General Partner  AUMOS 12ed Person of Hur DAS Tranche I GP, LLC General Partner  I nereoy accept the appointment as registered users 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 an accept the obligations of my position as registered agent.  Corporation Service Company  By:  Signature of Registered Agent A.		City, State			-	
Filing Fee: \$35.00	Signature of General PAOF 126 class accept the comply with the prand I am familiar Corporation Services.  By: Signature of Regis	ral Partner Person of HCP DAS e appointment as registered agent and rovisions of all statutes relative to the with an accept the obligations of my partner tered Agenty Ivia J. Queppet, Asst. V	Tranche I ( a agree to act to proper and co position as reg	SP, LLC, GAN in this capacity. implete perform	I further agree to	

Certified Copy (optional): \$52.50