

A02 00000 1869

Swerdlow Group
(Requestor's Name)
4651 Sheridan Street
(Address)
Ste 200
(Address)
Hollywood, FL 33021
(City/State/Zip/Phone #)

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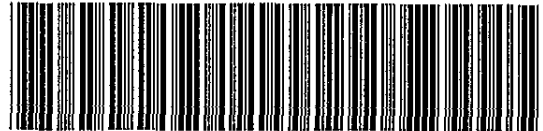
(Business Entity Name)

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**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. SWERDLOW BOCA NORTH MIAMI PARTNERS, LTD.
Name of the limited partnership

2. 11/26/02 3. A02000001569
Date of filing/registration in Florida 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:

Theodore R. Stotzer, Esq.
Name
c/o Swerdlow Real Estate Group, LLC
4651 Sheridan Street, Suite 200
Address
Hollywood, Florida 33021
City, State and Zip

5. The name and address of the new registered agent and/or office:

Theodore R. Stotzer, Esq.
Name
c/o Swerdlow Boca Developers Group, LLC
321 East Hillsboro Blvd.
Florida street address (P.O. Box **not** acceptable)
Deerfield Beach FL 33441
City, State and Zip

6. Such change(s) was/were authorized by the general partners.
SWERDLOW BOCA NORTH MIAMI PARTNERS, LTD.
BY: SWERDLOW NORTH MIAMI PARTNERS GP, INC., its general partner

By: [Signature]
Signature of General Partner Michael Swerdlow, Chairman

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]
Signature of Registered Agent Theodore R. Stotzer, 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**

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