

A06000006875

Florida Department of State

Division of Corporations
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To:

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

From:

Account Name : CORPORATION SERVICE COMPANY
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Phone : (850) 521-1000
Fax Number : (850) 558-1575

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**REGISTERED AGENT CHANGE
RELiance-THEATRE PLACE ASSOCIATES, LTD.**

Certificate of Status	0
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Page Count	02
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T. HAMPTON

FEB 19 2010

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.

1. RELiance-THEATRE PLACE ASSOCIATES, LTD.
Name of Limited Partnership or Limited Liability Limited Partnership

2. 07/13/2006
Date of filing/registration in Florida

3. A06000000875
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:

Reliance Housing Foundation, Inc., Attn: Robert O. Jackson

Name

805 E. Broward Boulevard, Suite 200

Address

Ft. Lauderdale, FL 33301

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.

Blanca Lozada
Signature of General Partner

Blanca Lozada, Attorney in fact on behalf of Reliance-Theatre Place, LLC., its general partner

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

Corporation Service Company

By: Grace E. Kirby

Signature of Registered Agent Grace E. Kirby, Assistant VP

Filing Fee: \$35.00

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