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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 265218 7375564
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JAN 27 AM 11:17

ORDER DATE : January 27, 2010

ORDER TIME : 3:09 PM

ORDER NO. : 265218-020

CUSTOMER NO: 7375564

CHANGE OF AGENT

NAME: DIM-WHITAKER SQUARE LIMITED
PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

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.

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DIVISION OF CORPORATIONS
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1. DIM-Whitaker Square Limited Partnership

Name of Limited Partnership or Limited Liability Limited Partnership

2. 10/29/2007

Date of filing/registration in Florida

3. A07000001216

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:

Muran Wald Biondo Moreno & Brochin, PA

Name

Two Alhambra Plaza, PH 1B

Address

Coral Gables, Florida 33394

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 DIM-Whitaker

Square, LLC By: Arthur L. Gallagher, Authorized Rep.

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: Carina L. Dunlap

Signature of Registered Agent

Carina L. Dunlap
Asst. Vice President

Filing Fee: -- -- -- -- \$35.00 --

Certified Copy (optional): \$52.50