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BILZIN SUMBERG DUNN PRICE & AXELROD LLP

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS 2500 FIRST UNION FINANCIAL CENTER

200 SOUTH BISCAYNE BOULEVARD • MIAMI, FLORIDA 33131-2336

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			Office Use Only		
CORPORATION 1	NAME(S) & DOCUM	ENT NUMBER	(S), (if known):		
1(Corpo	oration Name)	(Documen	t #)	——————————————————————————————————————	
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NEW FILINGS	AMENDMENT	Server			
Profit	Amendment		500002937645 -07/21/9901061009		
NonProfit	Resignation of R.A.,	Officer/ Director	*****35.	00 *****35.00	
Limited Liability	Change of Registere	d Agent	,		
Domestication	Dissolution/Withdra	Dissolution/Withdrawal			
Other	Merger	Merger			
OTHER FILINGS	REGISTRAT				
Annual Report	QUALIFICA	TION			
Fictitious Name	Foreign	Foreign			
Name Reservation	Limited Partnership				
	Reinstatement				

Examiner's Initials

Trademark

Other

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. BOVILLE ASSOCIATES, LTD.
Name of the limited partnership
2. 11/19/1979 Date of filing/registration in Florida Document number assigned 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: KELLY DRYE & WARREN LLP
Attn: James. W. Shindell Name_ 201 S. Biscayne Blvd., Suite 2400
Address Miami, Florida 33131 City, State and Zip
5. The name and address of the new registered agent and/or office: James W. Shindell, P.A., a Florida corporation
c/o Bilzin Sumberg Dunn Price & Axelrod LLP 200 So. Biscayne Blvd., Suite 2500 Florida street address (P.O. Box not acceptable)
Miami, FL_33131 City, State and Zip 6. Such change(s) was/were authorized by the general partners. Boville Realty Corp.
Signature of General Partner John L. Hatfield, President 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 the proper and the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.
James W. Shindell, P.A. Signature of Registered Agent James W. Shindell, President
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Filing Fee: \$35.00

Prepared by:

James W. Shindell, Esq.

Miami, Florida 33131

2500 First Union Financial Center

FL Bar No. 285293
BILZIN SUMBERG DUNN PRICE & AXELROD LLP

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