A10000000691

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	gistration Section vision of Corporations					
SUBJECT: 336 EAST ALEXANDER PALM ROAD, LTD. Name of Limited Partnership or Limited Liability Limited Partnership						
DOCUMI	ENT NUMBER:	A1000000691				
	sed Statement of Change of Reg submitted for filing.	stered Office and/or Registered Agent and				
Please retu	urn all correspondence concernin	g this matter to:				
<u>k</u>	Kevin M. Carroll, President an	d CEO				
	Lang Management Company	y, Inc.				
	Firm/Company					
790	Park of Commerce Boulevard	, Suite 200				
	Address	72.20				
	Boca Raton, Florida 3348	다 등 하				
	City, State and Zip Code	<u> </u>				
	•	ment com				
E mail	webmaster@langmanage address: (to be used for future annual	TICHE.COM				
E-man	address: (to be used for future annual	report notification)				
For further information concerning this matter, please call:						
	<i></i>	750 0000 S				
	Kevin M. Carroll	at (561) 750-8800 0				
Nai	me of Contact Person	Area Code and Daytime Telephone Number				
Enclosed i	s a \$35.00 check made payable t	o the Florida Department of State.				
STREET	ADDRESS:	MAILING ADDRESS:				
Registratio		Registration Section				
	f Corporations	Division of Corporations				
Clifton Bu		P. O. Box 6327				
2661 Exec	utive Center Circle	Tallahassee, FL 32314				
Tallahasse	e, FL 32301					

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	336 EAST ALEXAND				
	Name of Limited Partnership or L	imited Liability Lir	mited Partners	ship	
2.	11/3/2010	3.	A1000	10000000691	
Date of fil	Date of filing/registration in Florida Florida docu		Florida docur	ıment number	
4. The name of the Department of State	e registered agent and the registere e:	d office address as	shown on the	records of the Florida	
	William K	. Isaacson			
	Na	ime	. <u>.</u> .		
	21045 Com	mercial Trail			
	Ade	dress		•	
	Boca Raton,	Florida 33486		: -1	
	City, Sta	te and Zip		200	
5. The name and F	lorida street address of the new re	gistered agent and/	or office:		
	William K	. Isaacson		. 연속 대	
	Na	ame		(m 5)	
	790 Park of Commerc				
	Florida street address (l	P.O. Box not accep	table)	5 25	
	Boca Raton	FL	33487		
	City, Sta	te and Zip		•	
6. Such change(s)	is/are effective when filed by the F	lorida Department	of State.		
Signature of General	al Partner	-			
comply with the pro	appointment as registered agent covisions of all statutes relative to the obligations of memory accept the obligations of memory and accept the obligations of all statutes relative to the obligations of memory and accept the obligations of the obl	he proper and com	plete perform	I further agree to vance of my duties,	
Filing Fee: Certified Copy	\$35.00 (optional): \$52.50				