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B. KOHR

OCT 2 7 2011

EXAMINER



900213644449

11 OCT 26 PM 4: 31

RECEIPT OF STREET

11 OCT 26 AM 10: 38

SECRETARY OF STATE OF CORPORATIONS



ACCOUNT NO. : 12000000195

REFERENCE: 957280 4347669

AUTHORIZATION

COST LIMIT

ORDER DATE : October 25, 2011

ORDER TIME : 3:18 PM

ORDER NO. : 957280-010

CUSTOMER NO: 4347669

CHANGE OF AGENT

NAME: BROJO, A LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

	ited liability limited partners red office or registered agent			n order to
1.	BROJO, A LIMIT	ED PARTNE	RSHIP	
1	Name of Limited Partnership or	Limited Liabili	ty Limited Partnership	
July 1, 1983		3.	232257018	AIL
Date of filing/registration in Florida			Florida document n	umber
4. The name of the Department of State	registered agent and the register:	ered office addre	ess as shown on the record	s of the Florid
	Registered Agent Solu	tions, Inc.		
		Name		
	155 Office Plaza Drive	, Suite A		
		Address		
	Tallahassee, FL 32301			
	City, S	State and Zip		
5. The name and Fl	orida street address of the new	registered agent	and/or office:	
	Corporation Service Co	ompany		
		Name		
	1201 Hays Street			
	Florida street address	s (P.O. Box not	acceptable)	
	Tallahassee		FL 32301	
	City, S	State and Zip		
Signature of General Maureen Cathel hereby accept the comply with the pround I am familiar w. Corporation By:	I Partner II, VP on Behalf of Nubro appointment as registered agentists and accept the obligations of a Service Company or Agent Grace E. Kirby,	, Inc. the Gen at and agree to a to the proper and my position as	eral Partner et in this capacity. I furth I complete performance of	
Filing Fee:	\$35.00 (ontional): \$52.50			