A2174 SAX, WILLINGER & GOLD A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

Attornevs at Law 8180 N.W. 36 Street Suite 100 Miami, Florida 33166

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AND SEE THE DIFT.

August 31, 1998

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**Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Re: Plaza 1400 Building, Ltd.

Greetings:

Enclosed please find the Limited Partnership Statement of Change of Registered Office or Registered Agent, or Both in connection with the above referenced. Also enclosed is our check in the amount of \$35.00 to cover your fees.

Please revise your records accordingly and send me written confirmation of same.

Thank you for your cooperation in this matter.

Very truly yours,

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SCOTT R. WILLINGER

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## 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.	Plaza 1400 Building, Ltd.		
-	]	Name of the limited partnership	
2	December 31, 1985 Date of filing/registration in Florida	3 A 21747 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:

	Name	
10169 Spyglass	10169 Spyglass Way	
Boca Raton, FL	Address 33498	
	City, State and Zip	



5. The name and address of the new registered agent and/or office:

Scott Willinger Name 8180 N.W. 36th Street, Suite 100 Florida street address (P.O. Box <u>not</u> acceptable) <u>Miami</u> <u>FL</u> 33166 City, State and Zip 6. Such change(s) was/were authorized by the general partners. *STANULY B. GOLASTEIN COLA*.

Signature of General Partner 5 TALILLY 13,60LA

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 merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00