

A24021

LAW OFFICE OF

JOHN MICHAEL TRAYNOR

28 CORDOVA STREET

ST. AUGUSTINE, FLORIDA 32084

JOHN MICHAEL TRAYNOR, Esq.

904 / 829-6667

October 26, 2000

Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

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*****35.00 *****35.00

RE: Limited Partnership Statement of Change
of Registered Office or Registered Agent
or both/Cypress Point Partnership, Limited

Dear Sir/Madam:

Enclosed please find an original Limited Partnership
Statement of Change of Registered Office or Registered Agent, or
both, for Cypress Point Partnership. Please note that the
Resident Agent is being changed to James H. Costeira at 2820-A
U.S. #1 South, St. Augustine, Florida 32086.

Also enclosed please find check #858 in the amount of \$35.00
which sum represents the cost of the filing fee.

In the event you have any questions or need any additional
information, please do not hesitate to contact me.

Thank you for your cooperation.

Sincerely,


JOHN MICHAEL TRAYNOR

JMT/kh
Enclosures

FILED
OCT 30 PM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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. Cypress Point Partnership, Limited
Name of the limited partnership
2. December 31, 1986
Date of filing/registration in Florida
3. A24021
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:
- John Michael Traynor
Name
- 22 Cathedral Place
Address
- St. Augustine, Florida 32084
City, State and Zip

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

James Costeira
Name

2820 U.S. #1 South
Florida street address (P.O. Box **not** acceptable)

St. Augustine FL 32086
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

James H. Costeira
Signature of General Partner

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.

James H. Costeira
Signature of Registered Agent

**Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**

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00 OCT 30 PM 8:46
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