

## SHUMACKER & THOMPSON ATTORNEYS AT LAW

A PROFESSIONAL CORPORATION

CBL Center, Suite 210

	Chattanooga, Tennessee 37421 Telephone (423) 855-1814 Telecopier (423) 899-1278	
	Office Use Onl	y
CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):	
1. A28444 PA	1 Change	and the second s
(Corporation Name)	(Docyment #)	
2.		1 <b>049116</b> 632 02/12/0201048009
(Corporation Name)		****210.00 *****35.00
3(Corporation Name)	(D) (D)	And the same of th
(Corporation Name)	(Document #)	
4		
(Corporation Name)	(Document #)	
☐ Walk in ☐ Pick up time	Certifi	ed Copy
Mail out Will wait	Photocopy Certific	cate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS  Annual Report Fictitious Name	AMENDMENTS  Amendment Resignation of R.A., Officer/D Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION/QUALIFICAT Foreign Limited Partnership	ED AM IO: 16 OF STATE E. FLORIDA
	Reinstatement Trademark Other	

Examiner's Initials

## 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.

I. CBL/Bartow Limited Partnership
Name of the limited partnership
2. June 7, 1989  Date of filing/registration in Florida  3. AZ8444  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:  CBL/Jacksonville, Inc., c/o Lakeshore Mall
CBL/Jacksonville, Inc. c/o Lakeshore Mall
901 U.S. Highway 27 North, Suite 68 Address
Sebring, Florida 33870-2130
City, State and Zip
5. The name and address of the new registered agent and/or office:  CT Corporation System
CT Corporation System
Name
1200 South Pine Island Road
Florida street address (P.O. Box not acceptable)
Plantation, FL 33324  City, State and Zip
6. Such change(s) was/were authorized by the general partners.
CBL & ASSOCIATES_LIMITED PARTNERSHIP * By: CBL Holdings I, Inc., its
to // / postmen
By: /// Signature // General Partner Jeffery V. Curry, Assistant Secretary
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  JEDINITER F AULTMAN  ALDISTALL LURETARY
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