

A31318



ACCOUNT NO. : 072100000032
 REFERENCE : 097122 5129649
 AUTHORIZATION : *Patricia Pizento*
 COST LIMIT : \$ 35.00

FILED
 01 MAR 30 PM 4:49
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

ORDER DATE : March 29, 2001

ORDER TIME : 11:06 AM

ORDER NO. : 097122-045

CUSTOMER NO: 5129649

CUSTOMER: Ms. Amy Allen Drake
 Lamar Asset Management And
 365 South Street

800003931618--9

Morristown, NJ 07960

CHANGE OF AGENT

NAME: LAMAR EASTERN, L.P. LTD

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

RECEIVED
 01 MAR 30 AM 11:26
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

Handwritten signature/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.

1. LAMAR EASTERN, L.P. LTD

Name of the limited partnership

2. 03/15/1991

Date of filing/registration in Florida

3. A31318

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:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.

Name

1201 HAYS STREET, SUITE 105

Address

TALLAHASSEE, FLORIDA 32301

City, State and Zip

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

CORPORATION SERVICE COMPANY

Name

1201 HAYS STREET

Florida street address (P.O. Box not acceptable)

TALLAHASSEE

FL

32301

City, State and Zip

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

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.

Corporation Service Company

Monique Weaver

Signature of Registered Agent

Monique Weaver

**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**

FILED
01 APR 30 PM 4:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA