

A33148

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: MIML, Limited Partnership  
Name of Corporation

DOCUMENT NUMBER: A33148

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christy Infiesta  
Name of Contact Person

MIML, Limited Partnership  
Firm/Company

19501 Biscayne Blvd., #400  
Address

Aventura, FL 33180  
City/State and Zip Code

cinfiesta@turnberry.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christy Infiesta at (305) 914-8205  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: MIML, Limited Partnership
- 2. The principal office address: 19501 Biscayne Blvd., #400  
Aventura, FL 33180
- 3. The mailing address (if different): same as above

4. Date of incorporation/qualification: 07/06/1992 Document number: A33148

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)  
Marsha Soffer  
19501 Biscayne Blvd., #400  
Aventura, FL 33180

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
JACK E. KARSON  
19501 Biscayne Blvd., #400  
Aventura, FL 33180

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
Signature of an officer or director

JACK E. KARSON  
Printed or typed name and title

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 obligation 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 corporation has been notified in writing of this change.

[Signature]  
Signature of Registered Agent

08/12/10  
Date

If signing on behalf of an entity:  
  
\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314