4/30/01 (305)705-0001 Date Daytime Phone #

DOCUMENT # A9400000318  1. Entity Name  FILED	
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RDEAVCTONE DEACH DOODEDTIES ITD	
7 PM 5: 46	
Principal Place of Business  Mailing Address  2875 NE 191 81 #500  AVENTURA FL 33180  Mailing Address  SECRETARY OF STATE  TALLAHASSEE, FLORIDA	
3. Principal Place of Business	
2. Principal Place of Business 3. Mailing Address 1200 Ponce Ne Leon Blvd.	
Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPA	ACE
City & State Caral Gables, FL Coral Gables, FL 65-0468925	Applied For Not Applicable
	8.75 Additional e Required
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  Name  Name	ent
BREAKSTONE ARTHUR I	
2875 NE 191 ST., #500 ( 100 ) 1200 YOUR ARLEON BIOW	·
AVENTURA PL 33180	
city Coral Gables FL	33134
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.	, , ,
SIGNATURE 1/Well 1/10/0	}
Signatural typed or printed name of registered applicable. (NOT Registered Agent signature required when reinstating)  9. Capital Contributions  10. Amount of Capit il Contributions  11. MAKE CHECK PAYABLE TO	DEPT OF STATE
as Shown on record. \$1,000,000.00 in FLORIDA to a ste. 1,000,000.00 SEE REVERSE SIDE FOR F	
A GENERAL PARTNER THAT IS A BUSINESS EN TITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.	er.
12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY	
DOCUMENT / \$86206	
NAME BREAKSTONE ASSOCIATES INC.	Blud.
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