

A94000001309

: SUNILAND ASSOCIATES, LTD.
: 1200 BRICKELL AVENUE, SUITE 1500
MIAMI, FL 33131
----- (Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400041786754

10/28/04--01014--016 **35,00

2004 OCT 28 PM 2:52
TALLAHASSEE, FLORIDA

J. BRYAN NOV - 1 2004

**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. Suniland Associates, Ltd.

Name of the limited partnership

2. 09/27/1994

Date of filing/registration in Florida

3. A94000001309

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:

Pam Pearce

Name

1200 Brickell Avenue, Ste. 1500

Address

Miami, FL 33131

City, State and Zip

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

Pam Pearce

Name

801 Arthur Godfrey Road, Suite 600

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

Miami Beach

FL 33140

City, State and Zip

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

Signature of General Partner

Stephen A. Bittel, V.P. of Suniland G.P., Inc.

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]

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**

2004 OCT 28 PM 2:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA