## A9400000 1545

DELMA PROPERTIES, INC.
REAL ESTATE INVESTORS
444 MADISON AVENUE, SUITE 1204
NEW YORK, NEW YORK 10022

CR2E031(7/97)

900003039088--67 -11/09/99--01019--001 \*\*\*\*280,00 \*\*\*\*\*\*35.00

**Examiner's Initials** 

	Office Use Only
CORPORATION NAME(S) & DOCI	UMENT NUMBER(S), (if known):
1. City Center As.	Sociates LTd. (Dolument #)
2. (Corporation Name)	(Document #)
(Corporation Name)	(Document #)
4. (Corporation Name)  Walk in Pick up time  Mail out Will wait  NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	(Document #)  Certified Copy  Photocopy  Certificate of Status  AMENDMENTS  Amendment  Resignation of R.A., Officer/Director  Change of Registered Agent  Dissolution/Withdrawal  Merger
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agent, or both, in the State of Florida.
1. The name of the limited liability company is:
2. The mailing address of the limited liability company is: CO Derug Profession
444 MARISON ARNUE, SUITE 1204 NEW YORK, NEW YORK 10022.
11/17/1994 794000001545
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Scott Beanard Clothscript & Saura P.A.  Name  100 Second ME. Soura, Sure 701  Address  St. Peressurg, Rocina 33701  City, State and Zip
City, State and Zip  6. The name and address of the new registered agent and/or office:  CT (oePoeAmo Justems)  Name  1200 South PINE ISLAND ROAD  Florida street address (P.O. Box NOT acceptable)  PLANTATION, FLORIDA 33324  City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of a majority of the members of the limited liability company or as otherwise provided in the articles of organization or the regulations of the limited liability company.  [Signature of a member of authorized representative of a member]  [Signature of a member of authorized representative of a member]  [Printed or typed name of signee]
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 to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CHARLES W. MEYER

ASSISTANT SECRETARY

(Signature of Registered Agent)