

A95000001350

**ICN LTD.**

1801 South Federal Highway, Suite 300  
Delray Beach, Florida 33483

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Phone #

000004558650--0  
-08/27/01--01116--005  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED  
01 AUG 27 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A95-1350  
OK

Examiner's 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. ATLANTIC GAMING SHIPS, LTD  
Name of the limited partnership
2. 9/6/1995  
Date of filing/registration in Florida
3. A 95000001350  
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 ST., Suite 105  
Address  
TALLAHASSEE, FL 32301  
City, State and Zip

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

LOU DEFRAIN  
Name  
1801 S. FEDERAL HWY Suite 300  
Florida street address (P.O. Box not acceptable)  
DELRAY BEACH, FL 33483  
City, State and Zip

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

[Signature]  
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.

[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

FILED  
01 AUG 27 PM 5:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA