## A96000000943

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SECRETARY OF STATE

T. HAMPTON

AUG - 6 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section **Division of Corporations** 

SUBJECT: REALTY ASSET PROPERTIES, Ltd

(Name of Limited Partnership or Limited Liability Limited Partnership)

**DOCUMENT NUMBER:** A 96000000943

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

Please return all correspondence concerning this matter to:

Linda S. Rudy
(Contact Person)

1665 Palm Beach Lakes Blvd., Suite 730
(Address)

West Palm Beach, FL 33401

(City, State and Zip Code)

For further information concerning this matter, please call:

Linda S. Rudy

(Name of Contact Person)

\_at ( 561 ) 682-0877

(Area Code and Daytime Telephone Number)

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

## STREET ADDRESS:

**Registration Section Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

MAILING ADDRESS:

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

INHS04 (01/06)

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

change its registered	l office or registered agent, or bot	h, in the state of Florida.		
1 REALTY	ASSET PROPERTI	ES, Ltd.		
Na	me of Limited Partnership or Limited	I Liability Limited Partnership		
2.05/22/1996		<sub>3.</sub> A9600000943		
Date of filing/registration in Florida		Florida document number		
4. The name of the re Department of State:	gistered agent and the registered offi	ce address as shown on the records	of the Florida	
	CT Corporation Sy	rstem		
	Name			
1200 South Pine Island Rd.				
	Address			
	Plantation, FL 333	24	80 80 81 81	
	City, State an		AUG CRET LAHA	
City, State and Zip  5. The name and Florida street address of the new registered agent and/or office:  James P. Paul, Esq.  Name  3030 Rosewood Court				
	James P. Paul, Es	q.	UG -5 M ETAST OF S WHASSEE, F	
	Name			
Name  3030 Rosewood Court  Florida street address (P.O. Box not acceptable)				
Florida street address (P.O. Box not acceptable)				
	Davie	FL 33328		
	City, State an			
6. Such change(s) is/	are effective when filed by the Florid	la Department of State.		
Londa D. A	Porter			
Signature of General				
comply with the provi	ppointment as registered agent and a isions of all statutes relative to the pi th an accept the other ded Agent	roper and complete performance of		
Filing Fee: Certified Copy (	\$35.00 optional): \$52.50			