19600001940 CT Corporation System

CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 Tel 850 222 1092 Fax 850 222 7615 Attn: Jeff Netherton

600003402426--9 -09/25/00--01052--015 *****35.00 ******35.00

600003402426--9 -09/25/00--01052--914 *****105.00 *****105.00

CORPORATION(S) NAME		*****185.88 ****185.88
RI Windsor, Ltd.		
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		22 2
() Profit () Nonprofit	() Amendment	() Merger FL ST
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark
() Limited Partnership () LLC	() Annual Report () Name Registration () Fictitious Name	() Other (x) Change of RA () UCC
(x) Certified Copy (2)	() Photocopies	() CUS
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 430 (x) Pick Up
Name Availability Document	W 09/25/00	Order#: 5 5 5
Examiner Examiner		Ref#:
Updater	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	NGI#.
Verifier	-	0/01
Acknowledgement	/ 51/1	Amount S
W.P. Verifier	· //	

Florida Department of State, Jim Smith, Secretary of State

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 organized under the laws of the state of
Florida , submits the following statement
in order to change its registered office or registered agent, or both, in the state of Florida.
1. The name of the limited partnership is: RI Windsor, Ltd.
2. The date of filing/registration in Florida:
3. Document number assigned: A96000001940
A96000001940 4. The name and address of the present registered agent and office: Grant T. Downing
222 West Comstock Ave., Suite 101
Winter Park, LF 32789
5. The name and address of the successor registered agent and office.: (P.O. Box not Acceptable)
C T CORPORATION SYSTEM
c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida 33324
Such change was authorized by the general partners. SIGNATURE: **DATNUM** Manafuld General Partner
Date: 9/8/2000
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED PARTNERSHIP AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT. C. Morales SIGNATURE: C. Morales C. Morales Special Asst. Secretary (Type Name and Title of Officer)
Date: <u>9/8/2000</u>

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 INHSE 4 Filing Fee: \$35.00