Document Number Only C T Corporation System. Requestor's Name 660 East Jefferson Street Address Tallahassee, FL 32301 222-1092 City State Zip Phone **CORPORATION(S) NAME** Wilton Partners Lakeland () Profit () Merger () Amendment () NonProfit () Limited Liability Company () Dissolution/Withdrawal () Mark () Foreign () UCC-1 / UCC-3 Filing () Other () Annual Report () Limited Partnership Change of R.A. () Reservation () Reinstatement () Fictitious Name () Limited Liability Partnership () Photo Copies () CUS () Certified Copy () After 4:30 () Call if Problem () Call When Ready Pick Up () Will Wait Walk In () Mail Out Name Availability PLEASE RETURN EXTRA COPY(S) 8/24 FILE STAMPED Document THANKS Examiner CONNIE Updater **300002625653--**-08/26/98--01070--005 Verifier *****35.00 *****35.00 Acknowledgment W.P. Verifier

CR2E031 (1-89)

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	statem	ent
in order to change its registered office or registered agent, or both, in the sta Florida.	ate of	
1. The name of the limited partnership is:		
Wilton Partners Lakeland, Ltd.	=	· (C
2. The date of filing/registration in Florida:		8
April 21, 1997		AUG .
3. Document number assigned:	ASSI SSI	26
A9700000883	H _S	
4. The name and address of the present registered agent and office:		≥
Robert B. Boos		- či
2451 McMullen-Booth Road, Suite 263	>'`'	0
Clearwater, FL 34619		
5. The name and address of the successor registered agent and office.: (P.O. Box not Acceptable)		
C T CORPORATION SYSTEM		
	<u>id</u>	
Plantation, Florida 33324		
Such change was authorized by the general partners. Wilton takeland	G.P. (Corp.
SIGNATURE:		
President of General Partner Date: August 20, 1998		
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE	E OF	
PROCESS FOR THE ABOVE STATED LIMITED PARTNERSHIP AT THE PLA NATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS		
REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY I FURTHER	AGREE	<u> </u>
TO COMPLY WITH THE PROVISIONS/OF ALL STATUTES RELATIVE TO TH		ER
AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WIT ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.	H AND	
, C T CORPORATION SYSTEM	1	
SIGNATURE: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	oh	
(Officer)	 	
M.T. Fitzpatrick, Asst. Secretary (Type Name and Title of Officer)		
Date:August 25, 1998	-	
Division of Corporations B.O. Boy 6227 Tallabassas El	00044	

orations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$36.00 INHSE 4

(FLA, - LP 2824 - 2/1/92)