## A 970 DAY GENERAL MULAS 1169 321 SOUTHEAST 15TH AVENUE

ort Lauderdale, Florida 33301

TELEPHONE (954) 467-2000 FACSIMILE (954) 467-2306

DAVID G. MURRAY WALTER B. SCHNEIDER

April 14, 1998

MAILING ADDRESS
POST OFFICE BOX 2427
FORT LAUDERDALE, FLORIDA 33303

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

Re: III T, Ltd., A Florida Limited Partnership

500002490025--8 -04/16/98--01082--003 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Dear Sir/Madam:

Enclosed herein please find a change of registered agent form for the above named Florida Limited Partnership. Please file and return the copy to us stamped with the date of filing.

We are enclosing a check in the sum of \$35.00 to cover the Filing Fee.

Your cooperation in this matter is appreciated.

Very truly yours,

W. P. Verify

DAVID G. MURRAY

DGM/mcl enclosure

Availability

Document
Examiner

Updater

Unduter
Verifyer

Acknowledgement

## 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 III T, Ltd	1.			
	-	Name of the limited p	artnership	-
2. May 23, 19 Date of filing/regist	997 ration in Florida	3	A97000001169  Document number assign	ed
4. The name of the regis Department of State:	tered agent and t	he registered offic	e address as shown on the rec	
= op-mailoni of butto.	Corporation	Service Compa	any	
	1201 Hays S	Name treet	-	S
_		Address	<u> </u>	98 A SECF
_	Tallahassee	, Florida 3230	)1	APR APR CRETA
		City, State and	Zip	ARY C
5. The name and address	of the new regis	tered agent and/or	office:	PH 4: OF STA
<del></del>	David G. Mu	rray, Esquire		
		Name		<b>&gt;</b>
	321 Southea	st 15th Avenue	<u>.</u>	
	Florida stree	et address (P.O. Box	not acceptable)	2
	Fort Lauderd	ale, FI	33301	
Court at an art a		City, State and Z	Zip	• ,
Such change(s) was/we	ere authorized by	the general partner	ers.	
	· O	., a Florida	Corporation, General F	'artner
feld A.			#	
ignature of General Partner L				
hereby accept the appoi omply with the provision am familiar with and ac eing filed merely to refl artnership has been notij	ccept the obligat	ions of my position the registered of	gree to act in this capacity. ver and complete performanc on as registered agent. Or, fice address, I hereby confir	I further agree to e of my duties, and if this document is m that the limited
ignature of Registered Agent		· · · · · · · · · · · · · · · · · · ·		
Divisi	on of Corporati	ons, P.O. Box 632	27, Tallahassee, FL 32314	

Filing Fee: \$35.00

INHS04(9/97)