

A9700000 1566

(Requestor's Name)

Dr. KROP
509 Red Barn Rd
DALTON, MA 01226

☐ PICK-UP ☐ WAIT ☐ MAIL

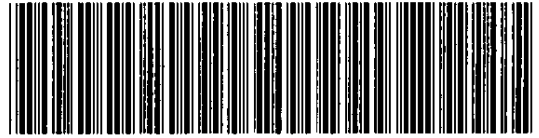
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. BRYAN

JUL 28 2009

EXAMINER

**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.

1. MANDLKROA, LTD
Name of Limited Partnership or Limited Liability Limited Partnership
2. 7-21-09 3. A97000001566
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

H R A W G C O R P
Name
1801 N. MILITARY TRAIL
Address
BOCA RATON, FL 33431
City, State and Zip

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

M I C H A E L M. K R O P
Name
9601 COLLINS AVE, UNIT 1710
Florida street address (P.O. Box not acceptable)
BAL HARBOR FL 33154
City, State and Zip

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6. Such change(s) is/are effective when filed by the Florida Department of State.

[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.

[Signature]
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50