A9800000170

_____ INTERNATIONAL HOLDINGS, INC.

400 East Linton Boulevard, #G-3 • Delray Beach, Florida 33483 Tel: (561) 278-1169 • Fax: (561) 278-6930

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CR2E031(7/97)

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Examiner's Initials

	Office Use Only		
CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):		
1. Square me flar ther S	Ltd. A98-170 == =================================	02	-
2(Corporation Name)	(Document #)	FIL 2_IIIN 10	
3. (Corporation Name)	(Document #)		erin
4. (Corporation Name)	(Document #)	÷	=
☐ Walk in ☐ Pick up time Mail out ☐ Will wait	Certified Copy Photocopy Certificate of Status		
NEW FILINGS	<u>AMENDMENTS</u>		
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger		÷
OTHER FILINGS	REGISTRATION/QUALIFICATION	-	-=-
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	N	L.

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.

Square Or	ne Partners, Ltd.			**	
1.	Name of the limited partnership	•		- '	
2 1-17-98	3 A98000000170	-			
Date of filing/regis	tration in Florida Document number assigned				
4. The name of the reg. Department of State	istered agent and the registered office address as shown on the record	ls of the Flo	orida		
	Name	5 · · · · · · ·		ga lli sa e	F
	9350 South Dixie Highway, Suite 1550 Address				
	Miami, FL 33156				
	City, State and Zip	- 5 <u>0.</u>	02	, guita ti	
5. The name and addre	ess of the new registered agent and/or office: Frank J. Bennardo, Esq. Bennardo & Bennardo Name	WHVSSEET	ME O M	APTING THE PROPERTY OF THE PRO	-:- -:_
	1860 N.W. Boca Raton Blvd.	ين = :		,	
-	Florida street address (P.O. Box not acceptable)	87		· ·	
	Boca Raton FL 33432	D.F.	្រា		
	City, State and Zip			1.30	. = 1
6. Such change(s) was	/were authorized by the general partners.				-
I MAN	DELLAN HISTORY TO	* . e ·	_ :	* 12 m	
with the provisions of	ointment as registered agent and agree to act in this capacity. I furthe all statutes relative to the proper and complete performance of my of the obligations of my position as registered agent. Or, if this documnge in the registered office address, I hereby confirm that the limite	ment is hein	o filed		
	\/ <u> </u>	•			
Signature of Registered Ag	ent ent			ş	:
Ma D	ake checks payable to Florida Department of State and mail to: ivision of Corporations, P.O. Box 6327, Tallahassee, FL 32314				

Filing Fee: \$35.00

INHS04(9/98)