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ACKERMAN

◆ LINK ◆

SARTORY

Attorneys At Law

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222 Lakeview Avenue
Suite 1250 - Esperante
West Palm Beach, FL 33401

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NEW FILINGS	
	Profit
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	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

[Handwritten Signature]

**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. Kane Communities of Audubon, Ltd.

Name of the limited partnership

2. 2/5/98

Date of filing/registration in Florida

3. A98000000354

Document number assigned

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

Ackerman, Link & Sartory, P.A.

Name

222 Lakeview Avenue, Suite 1330

Address

West Palm Beach, FL 33401

City, State and Zip

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

Lawrence J. Diamond

Ackerman, Link & Sartory, P.A.

Name

222 Lakeview Avenue, Suite 1250

Florida street address (P.O. Box not acceptable)

West Palm Beach, FL 33401

City, State and Zip

6. Such change(s) was/were authorized by the general partners.

Kane Communities of Audubon, Inc.

By: 

Signature of General Partner Leif E. Metsch, President

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.


Signature of Registered Agent

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

Filing Fee: \$35.00

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