## A-98000000497

Office Use Only



000210262400

AND THE SHOULD HAVE AND THE SHOULD BE SHOULD B

RECEIVED
RECEIT OF STREET
PORTUGENES
RECEIT OF STREET
RECEIT OF STREET
RECEIVED
RECEIVED
RECEIVED

FILED

ANG 25 PM 12: 35

ECRETARY OF STATE

ANASSEE, FLORIDA

N. Culligan AUG 2 5 2011 .



ACCOUNT NO. : 12000000195				
REFERENCE : 862340 7830453				
AUTHORIZATION: Spulsblena.				
COST LIMIT : \$ 35.00				
ORDER DATE : August 2, 2011				
ORDER TIME : 9:42 AM				
ORDER NO. : 865340-001				
CUSTOMER NO: 7830453				
CHANGE OF AGENT				
NAME: RUNNING BROOK ASSOCIATES, LTD.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY				
CONTACT PERSON: Stephanie Milnes EXT# 2920				
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. RUNNING	BROOK ASSOCIATES, LTD	).		
	Name of Limited Partnership or Lin	mited Liability Limited Partners	ship	
2. 02/24/1998		3. A98000000497		
Date of filing/registration in Florida		Florida document number		
4. The name of the Department of Sta	e registered agent and the registered	l office address as shown on the	records of the Florida	
	NRAI Services, Inc.			
	Na	Name :		
	515 E. Park Avenue		11 AU SECRE	
	Add	ress		
Tallahassee, FL 32301		ZX: 30 2		
	City, Stat	e and Zip	25 ART C SSEE	
5. The name and l	Florida street address of the new reg	istered agent and/or office:	PN 12: 35 OF STATE E, FLORIDA	
	Corporation Service Com	pany	2: 3 ORI	
	Name			
	1201 Hays Street			
	Florida street address (P.O. Box not acceptable)			
	Tallahassee	FL 32301		
	City, State	e and Zip		
Signature of Gener Maureen Cathell, I hereby accept the comply with the pr and I am familiar Corporation	ral Partner Authorized Person on behalf of CA e appointment as registered agent are ovisions of all statutes relative to the with an accept the obligations of my on Service Company tered Agent Grace E. Kirby, As	AH-IDA Running Brook LLC, ind agree to act in this capacity. e proper and complete performs position as registered agent.	I further agree to	
Filing Fee:	\$35.00			

Certified Copy (optional): \$52.50