

A98000000901
HECTOR CORTES

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

August 21, 1998

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-08/24/98--01058--003

*****35.00 *****35.00

Dear Sir,

I am writing in reference to a Florida Limited Partnership (Document # A98000000901) "Fulcrum Fund, LTD) whose principal address has been incorrectly filed. The correct address is:

1400 Alabama Ave
Suite 7
West Palm Beach, Florida
33401

In addition, the address for the General Partner has also been incorrectly filed and should read as noted above.

Thank you!

Hector Cortes



Name	MBH
Availability	MBH
Document Examiner	MBH
Updater	MBH
Updater Verifier	MBH
Acknowledgement	MBH
W. P. Verifier	MBH

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 AUG 24 PM 3:11

**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. FULCRUM FUND, LTD
Name of the limited partnership

2. April 10, 1998
Date of filing/registration in Florida

3. A 98000000901
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:

HECTOR A. CORTES
Name
1600 S FEDERAL HWY
Address
POMPANO BEACH, FLORIDA 33401
City, State and Zip

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

HECTOR A. CORTES
Name
1400 ALABAMA AVE, SUITE 7
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.

Hector Cortes - Cavalier Capital Corp
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. 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.

Hector Cortes
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00

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