

A98000001297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

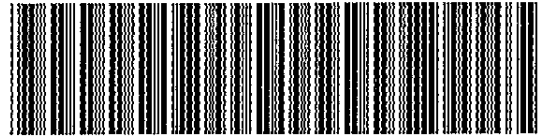
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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RECEIVED  
03 NOV -6 PM 2:11  
DIVISION OF CORPORATION

FILED  
03 NOV -6 AM 8:08  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

November 6, 2003

Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

FILED  
NOV - 9 AM 8:09  
TALLAHASSEE, FLORIDA

Re: Order #: 5971045 SO  
Customer Reference 1:  
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Portfolio Seven of Florida Limited Partnership (FL)  
Change of Agent  
Florida

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Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

**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 organized under the laws of the state of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Portfolio Seven of Florida Limited Partnership  
Name of the limited partnership
2. 05/26/1998 3. A98000001297  
Date of filing/registration in Florida Document number assigned

4. The name and address of the present registered agent and office:

Corporation Service Company  
1201 Hays Street  
Tallahassee, Florida 32301-2525

5. The name and street address of the successor registered agent and office: (P.O. Box not acceptable)

C T Corporation System  
c/o C T Corporation System, 1200 South Pine Island Road  
Plantation, Florida 33324

Such change was authorized by the general partners.

[Signature]  
Signature of General Partner

9/22/03  
Date

*Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, 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 obligation of my position as registered agent.*

[Signature]  
Brenda L. White  
Asst. Secretary  
Registered Agent signature

9/29/03  
Date

**Filing Fee: \$35.00**

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

INHSE004(3/95)