

A980000001480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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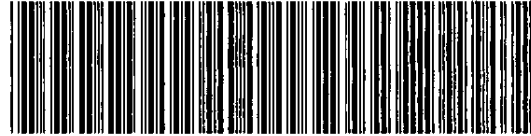
(Business Entity Name)

(Document Number)

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JAN 24 2011  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FPIP IX LTD  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A98000001480

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

George A. Morgan, Jr.

Contact Person

Morgan Property Group, LLC

Firm/Company

450 E. Las Olas Blvd., Suite 730

Address

Fort Lauderdale, FL 33301

City, State and Zip Code

cfrye@morganpg.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Catherine Frye

Name of Contact Person

at ( 704 )

909-4507

Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

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

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**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. FRIP IX LTD  
Name of Limited Partnership or Limited Liability Limited Partnership
2. 06/15/1998 3. A98000001480  
Date of filing/registration in Florida Florida document number

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

George A. Morgan, Jr.  
Name  
300 S.E. Second Street, Suite 880  
Address  
Fort Lauderdale, FL 33301  
City, State and Zip

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

George A. Morgan, Jr.  
Name  
450 E. Las Olas Blvd., Suite 730  
Florida street address (P.O. Box not acceptable)  
Fort Lauderdale FL 33301  
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]  
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.*

[Signature]  
Signature of Registered Agent

Filing Fee: \$35.00  
Certified Copy (optional): \$52.50

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