9800000L709

(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)	· ·		
	10.			
(Cit	y/State/Zip/Phone	· #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		·		

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B. KOHR

DEC 2 0 2011

EXAMINER



000214656950



ACCOUNT NO. : 12000000195

REFERENCE : 032536

7860016

AUTHORIZATION_

COST LIMIT

ORDER DATE: December 20, 2011

ORDER TIME : 10:39 AM

ORDER NO. : 032536-056

CUSTOMER NO: 7860016

CHANGE OF AGENT

NAME:

AERC HP ADVISORS LIMITED

PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY ____ 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. AERC HP AL	OVISORS LIMITED PA	ARTNERSHIP		
N	Name of Limited Partnership	or Limited Liability Limited Partne	ership	
2. 07/16/1998		3. A98000001709	3 A98000001709	
Date of fili	ng/registration in Florida	Florida doc	ument number	
4. The name of the Department of State		stered office address as shown on ti	he records of the Florida	
	CT Corporation Syst	em		
		Name	_	
	1200 South Pine Isla	nd Road		
		Address		
	Plantation, FL 33324		u	
	City	y, State and Zip		
5. The name and Fl	orida street address of the ne	ew registered agent and/or office:		
	Corporation Service	Company	_	
		Name		
	1201 Hays Street			
	Florida street addr	ess (P.O. Box not acceptable)	_	
	Tallahassee	FL 32301	_	
	City	y, State and Zip		
6. Such change(s) i	s/are effective when filed by	the Florida Department of State.		
Signature of Genera Maureen Cathell, V		Sociated Estated Realty Corporation	n. Inc General Partner	
I hereby accept the	appointment as registered ag	gent and agree to act in this capacit	y. I further agree to	
and I am familiar w Corporation		e to the proper and complete perfor of my position as registered agent.	mance of my duties,	
By: Signature of Register	ered Agent Sylvia Queppe	et, Asst. Vice President		
Filing Fee:	\$35.00			
Certified Copy ((optional): \$52.50			