A98000002467

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filling Officer:	

Office Use Only



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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.

t LNR Harbor Fund Limited Partnership No. VIII	
Name of the limited partnership	
2. 10/29/98 Date of filing/registration in Florida 3. A9800002467 Document number assigned	
The name of the registered agent and the registered office address as shown on the reconcepartment of State: LNR Harbor Fund GP VIII, Inc.	ords of the Florida
760 NW 107th Avenue, Suite 300	o G
Address Miami, Florida 33172	THE NOV 25 AN ID: 08 DIVINION OF CORPORATION TALLAHASSEE, FLORIDA
City, State and Zip	NON 25 AM
5. The name and address of the new registered agent and/or office:	SEE, FE
LNR Harbor Fund GP VIII, Inc.	
1601 Washington Avenue, 8th Floor	DAYS OAS
Morida street address (P.O. Box not acceptable)	•
Miami Beach City, State and Zip 6=Such change(s) was/were authorized by the general partners.	
LNR Marbor Fund GP VIII, Inc., a Florida corporation, its	general partner
Signature of General Pour Shelly L. Rubin, Vice President	
I hereby accept the appointment as registered agent and agree to act in this capacity. I furth with the provisions of all statutes relative to the proper and complete performance of m familiar with find accept the obligations of my position as registered agent. Or, if this dock merely to reflect a change in the registered office address, I hereby confirm that the limit been notified in writing of this change.	v duties, and I am
Signature of Registered Agent	
Make checks payable to Florida Department of State and mail to:	

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

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