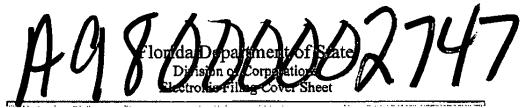
Division of Corporations

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Account Number: 120040000083 Phone: (954)474-8000 Fax Number: (954)474-9850

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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, Plorida 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.

	<u>Professional Centre</u> le of Limited Partnership or L				
Decen	December 14, 1998		3 A98000002747		
Date of filing/registration in Florida		Plorida document number			
. The name of the reg repartment of Statu:	istered agent and the registere	ed office address	as shown on the reco	rds of the Florida	
_	Mark C	Decarolis			
_	N	ausić			
_	23 Sen	eca Road			
_	Ad	ldress			
_	Sea Ranch L	<u>akes,</u> Fl. 333	08		
_	City, Str	ste and Zlp		ALC: 29 S	
i. The name and Florid	da street address of the new re	egistered agent ar	d/or office:	228 三	
_	Steven A. W	/einberg, Esc	 	TARY ASSE	
•	И	anno		SEC S	
	7805 SW	/ 8th Court		A PER A	
•	Florida street address (P.O. Box not see	eptable)	# # F	
	Plantation	F	33324	A II: 21	
•	City, St	ate and Zip		300	
6. Such change(s) is/as Signature of General P	re effective when filed by the warmer	Florida Depurtus 	ent of State.		
comply with the provise and I am familiar with	pointment as registered agent ions of all statutes relative to <u>an accept the</u> obligations of a	the proper and c	omplate performance		
Ster Signature of Registerer	ven A. Weinberg	Τ			
Ffling Fee: Certified Copy (o)	\$35.00 ntional): \$52.50				