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CT CORPORATION SYSTEM

March 13, 2003

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

Re:

Order #: 5807162 SO Customer Reference 1:

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

CSC Boynton Landing, Ltd. (FL) Change of Agent Florida

· Maria

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

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Katrina Forsman Fulfillment Specialist Katrina_Forsman@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 SECRLIARY OF STATE

Page 1 of 1

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of	of sections 620.105 and 620).1051, Florida Statutes	, the undersigne	d limited
partnership organized under t	, su	ibmits the		
following statement in order	to change its registered of	Tice or registered agent	t, or both, in the	e state of
Florida.		_		
				•
1 CSC Boynton Landing, Ltd.				
	Name of the limited	partnerskip		 - ·
2. Aguust 12, 1999	3,			
Date of filing/registration	in Florida	Document nur	mber assigned	
4. The name and address of the	he present registered agent as	nd office:		
Comomiti	on Service Company			_
4				For D
1201 Hay				
	ee, Florida 32301	Samuel and afficient (D.O.		
5. The name and street addre	_	agent and office: (P.O.	Box not accepta	13 PH 2: 3
	oration System			- 기문 글 .
	orporation System, 1200 South	Pine Island Road		- CS
Plantation	, Florida 33324	ж.		
Such change was authorized b	y the general partners.			
har oviha	horstone?	3-12-0	ጎ	
Signik	nire of General Partner	<u> </u>	<u>Date</u>	
Having been named as regi	stered agent and to accept	service of process for	the above state	ed limited
partnership at the place design and agree to act in this capac proper and complete perforn	ynated in this certificate, I h xity. I further agree to comp	ereby accept the appoint Iy with the provisions of	itment as registe ^r all statutes relat	red agent tive to the
proper and complete perforn position as registered agent.	sance of my duties, and I a	m familiar with and ac	cept the obligati	on of my
		····3-12-03	. .	* *
Regist	ered Agent signature Michael E. Jos	nec	Date	
	Assistant Secret	tary		
	. Filing Fee: \$	35 66		
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Division of Corporations, P.O. Box 6327, Taliahassee, FL 32314

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