

A99000001405

Florida Department of State  
Division of Corporations  
Public Access System

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## To:

Division of Corporations  
Fax Number : (850) 617-6380

L. SELLERS

## From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5926

JUN - 6 2008

EXAMINER

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## REGISTERED AGENT CHANGE

355 ALHAMBRA PLAZA, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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. 355 Alhambra Plaza, LTD.

Name of Limited Partnership or Limited Liability Limited Partnership

2. 08/26/1999

Date of filing/registration in Florida

3. A99000001405

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:

Cobb, Kolleen

Name

355 Alhambra Circle, Suite 900

Address

Coral Gables, Florida 33134

City, State and Zip

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

CT Corporation System

Name

1200 South Pine Island Road

Florida street address (P.O. Box not acceptable)

Plantation FL 33324

City, State and Zip

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

  
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.

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Signature of Registered Agent

  
**Sohan R. Dindyal**  
**Vice President**

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

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