

A 99000002122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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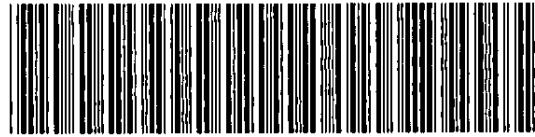
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

S. HAWKES
MAY 17 2010
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 382901 7775081

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : May 13, 2010

ORDER TIME : 9:24 AM

ORDER NO. : 382901-023

CUSTOMER NO: 7775081

CHANGE OF AGENT

NAME: WINDROSE COLUMBIA PROPERTIES,
LTD.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XXX PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young -- EXT# 2962

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. WINDROSE COLUMBIA PROPERTIES, LTD.
Name of Limited Partnership or Limited Liability Limited Partnership

2. December 17, 1999
Date of filing/registration in Florida

3. A99000002122
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:

C T Corporation System
Name

1200 South Pine Island Road
Address

Plantation, FL 33324
City, State and Zip

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

Corporation Service Company
Name

1201 Hays Street
Florida street address (P.O. Box not acceptable)

Tallahassee FL 32301
City, State and Zip

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

Blanca Lozada
Signature of General Partner

Blanca Lozada, Authorized Person on behalf of WMPT Columbia Management, LLC, its 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.

Corporation Service Company
By: Grace E. Kirby

Signature of Registered Agent Grace E. Kirby, Asst. VP

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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