# B0000000192

(Re	equestor's Name)	
(Ac	idress)	
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(Cit	ty/State/Zip/Phone #	£)
PICK-UP		MAIL
(Bu	isiness Entity Name	)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
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NOR NATIONAL CORPORATE RESEARCH, LTD.			E	Please return evidence of filing in the SASE enclosed. If you have any questions, please call. Thanks!		
New York, NY	~	Albany, NY	~	Dover, DE	~	Los Angeles, CA

### SEARCH REQUEST FORM

Date: 7/16/2004

To:FL Department of State -- Division of CorporationsPhone No.:850-488-9000

From: Amy Brown / abrown@nationalcorp.com

Please refer to the following reference number on your invoice: # MOL

# <u>Entity Name(s)</u>

BVT CAPITAL PARTNERS III, LP BVT CAPITAL PARTNERS VIII, LP BVT CAPITAL PARTNERS XI, LP BVT CAPITAL PARTNERS XIV, LP BVT CAPITAL PARTNERS XIX, LP BVT CAPITAL PARTNERS XVI, LP BVT CAPITAL PARTNERS XVII, LP BVT CHAPEL HILLS, LTD. BVT DEVELOMENT CORPORATION II BVT DEVELOPMENT CORPORATION IV BVT DEVELOPMENT PARTNERS II, L.L.P. BVT DEVELOPOMENT CORPORATION BVT INSTITUTIONAL INVESTMENTS, INC. BVT REAL ESTATE DEVELOPMENT, INC. CLAY-FRY PROPERTIES, INC. NATIONAL CAPITAL PARTNERS, INC. NATIONAL PARTNERS, L.P. U.S. RETAIL INCOME FUND IV, LP U.S. RETAIL INCOME FUND V, LP U.S. RETAIL INCOME FUND VII, LP U.S. RETAIL INCOME FUND VIII, LP U.S. RETAIL INCOME FUND VIII, LP U.S. RETAIL INCOME FUND VIII-B, LP U.S. RETAIL INCOME FUND VIII-C, LP

# <u>Type of Service(s):</u> Change of Agent Filing

# Jurisdiction: Secretary of State, FL

**\*\* ADDITIONAL COMMENTS \*\*** 

Filing fees and Return Envelope (postage paid) attached. PLEASE call or e-mail before rejecting documents (or with any other questions you may have)

If you have any questions concerning what to report to NCR, please contact us before sending results.

### 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.

1.U.S. Retail Income Fund VIII, Limited Partnership Name of the limited partnership

2.6/21/2000 Date of filing/registration in Florida

3.B0000000192 Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

	CT Corporation System	
	Name	
	1200 South Pine Island Road	
	Address	The OF
	Plantation, FL 33324	Fc -
	City, State and Zip	
5.	The name and address of the new registered agent and/or office:	19 MIN: 46
	NATIONAL CORPORATE RESEARCH, LTD.	F Q
	Name	107.46
	103 N. Meridian Street	LORIDI
	Florida street address (P.O. Box not acceptable)	Ľ.
	Tallahassee FL 32301 City, State and Zip	
6	Such change(a) was/were authorized by the general partners	

Such change(s) was/were authorized by the general partners.

BVT Institutional Investments, Inc., General Partner

SLOTH U.

Signature of General Partner, By:  $\mathcal{M}$ . Such t Weak  $\mathcal{M}$  - Secret for the proper 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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

National Corporate Research, Ltd.

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Signature of Registered Agent By: Amy Brown, Asst. Secretary

> 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