

BO1000000174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

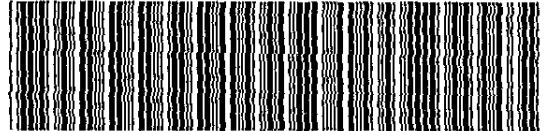
(Business Entity Name)

(Document Number)

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04/17/06--01023--012 \*\*140.00

*[Handwritten signature]*

# PREMIER CORPORATE SERVICES, INC.

200 West Adams Street, Suite 2007  
Chicago, IL 60606  
(312) 346-3606 (800) 934-2556  
Fax: (312) 346-3607

April 14, 2006

*VIA REGULAR MAIL*

Division Of Corporations  
Florida Department Of State  
409 E. Gaines Street  
Tallahassee, FL 32399

**RE: Premiere IV, L.L.C.**

**Premiere Partners II Limited Partnership  
Premiere Partners III Limited Partnership  
Premiere Partners IV Limited Partnership  
Premiere Partners V Limited Partnership  
Serenoa Farms Owners Association Inc.**

**Westchester Group, Inc. d/b/a Westchester Group, Inc. of Illinois  
Westchester Asset Management, Inc.  
Premiere Farmland II Inc.  
Cozard Asset Management, Inc.**

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the form to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,



Tony Alexander

TA/smc.  
Encl.

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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. Premiere Partners V Limited Partnership

Name of Limited Partnership or Limited Liability Limited Partnership

2. 5/17/2001

Date of filing/registration in Florida

3. B01000000174

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:

CT 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:

NRAI Services, Inc.

Name

2731 Executive Park Drive, Suite 4

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

Weston

FL 33331

City, State and Zip

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

[Signature] VP, CPM, Inc, 98, C/w/As Asst. Mgmt. Hq, 98 2/24/01  
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.

NRAI Services, Inc.

by: [Signature]

Signature of Registered Agent

Anthony S. Alexander, Asst. Secretary

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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