

B01000000374

GT CORPORATION

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

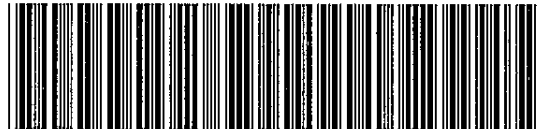
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

3/17 R/A Change

B01-374

Office Use Only



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03/17/03--01055--012 \*\*35.00

MJH

RECEIVED  
03 MAR 17 PM 12:03  
DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
03 MAR 17 PM 2:01  
TALLAHASSEE, FLORIDA

**CT CORPORATION SYSTEM**

March 17, 2003

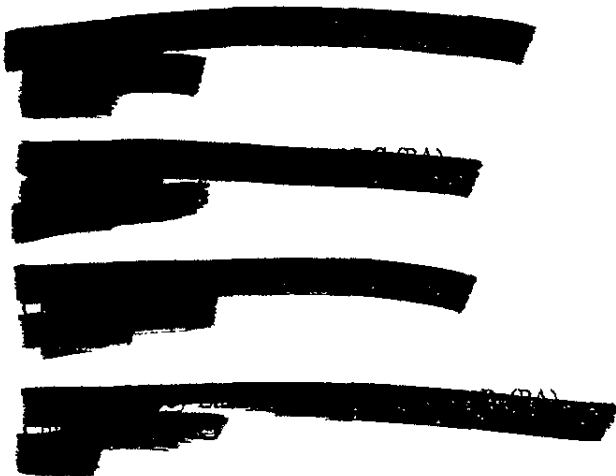
Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

Re: Order #: 5797850 SO  
Customer Reference 1:  
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

~~AMC Delancey Miami Lakes Partners, L.P. (PA)~~  
Change of Agent  
Florida



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

CT CORPORATION SYSTEM

[REDACTED]  
[REDACTED] nt  
F

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,

Ashley A Mitchell  
Fulfillment Specialist  
Ashley\_Mitchell@cch-lis.com

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

**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 organized under the laws of the state of Pennsylvania, submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. AMC Delancey Miami Lakes Partners, L.P.  
Name of the limited partnership

2. 10/24/01 Date of filing/registration in Florida      3. B01000000374 Document number assigned

4. The name and address of the present registered agent and office:

Corporation Service Company  
1201 Hays Street  
Tallahassee, FL 32301-2525

5. The name and street address of the successor registered agent and office: (P.O. Box not acceptable)

C T Corporation System  
c/o C T Corporation System, 1200 South Pine Island Road  
Plantation, Florida 33324

Such change was authorized by the general partners.

By AMC DELANCEY MIAMI LAKES ASSOCIATES LP  
BY AMC DELANCEY MIAMI LAKES, INC.

By [Signature]

Signature of General Partner

PATRICK J. BRADY VP & SECRETARY

3/3/03

Date

Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, 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 obligation of my position as registered agent.

[Signature]

Registered Agent signature

James Newsome, Asst Sec'y

3/14/03

Date

Filing Fee: \$35.00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHSE004(3/95)