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(((H05000245201 3)))

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REGISTERED AGENT CHANGE

EDR ORLANDO LIMITED PARTNERSHIP

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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	EDR ORLANDO LIMITED PARTNERSHIP								
		1	lance of the limite	d partnership		•		-		
	2. 3/29/200	Q2	3.		B02000000	107				
	Date of filing/registre	ition in Florida	-	I	Document numbo	r assigned	_	-		
	4. The name of the regis Department of State:	dered agent and th	ne registered of	Tice address	s as shown on	the records	of the Plor	ida		
	•	Corpo	ration Servic	e Compa	ny		=1	_		
		Name PS						25		
			1201 Hays S	treet	<u> </u>		5 9	8	margaret.	
			Address	-		•	===	}	1 1	
		Tallah	assee	_FL	32301-2525		TARY IASSE	7	-	
			City, State a	nd Zip			SE Z	~	L-A-3	
	5. The name and address	s of the new regist	ered agent and	l/or office:			<u>-म</u> ी सार	45 th Hd	7 7	
		National Co	ornorate R	esearch.	. Etd., Inc		FLORIDA	45	-	
			Name				8	떀		
	•	5-	i5 East Parl				P	•		
			nderess (P.O. 1	4.5.5 (4.5		 .			•	
		Tallaha	-	FL.	3230	1			•	
			City, State a							
abi	6. Such change(s) was/v	ere authorized by general part	the general principle. By: E	riners B DR Orlan	y: EDR Orl do, Inc.,	ando, LLO a Delawar	C, a Del ce corpo	aware ratio	limited n, its	
_	(ble N.S.w-	-	wanag Ra	er Indall H.	Brown	Vice Presi	ident & Sei	cretary	,	
·····	Signature of General Partner			Print Sign	er's Name & Titl	and/or Capac	ity		#-	
١	I hereby accept the appoint with the provisions of all familiar with and accept merely to reflect a chang been notified in writing a	the obtigations of ic in the registere	ed agent and a to the proper my position as d office addres	gree to act i and compl registered ss, I hereby	n this capacity ete performan agent. Or, if t confirm that i	. I further a ce of my du his documen he limited p	igree 10 con ities, and I it is being j armership	nply am Tied has		
Þ	Swenner	eows.	к	aren Mck	Ceown	Asst	. Secreta	ry	-	
,	Signature of Registered Agent	7		Print Sign	er's Name & Titl	e and/or Capac	ity		_	
	•									

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