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DIVISION OF CORPORATIONS

TRIAD

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**B04000000503**

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617-6380

From:  
Account Name : TRIAD PROFESSIONAL SERVICES, LLC  
Account Number : 120020000094  
Phone : (770) 777-2091  
Fax Number : (770) 220-1943

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REGISTERED AGENT CHANGE

(WESTLAND PROMENADE) LIMITED PARTNERSHIP

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G. MCLEOD

JUN 17 2008

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. SC (Westland Promenade) Limited Partnership**

Name of Limited Partnership or Limited Liability Limited Partnership

**2. 11/19/2004**

Date of filing/registration in Florida

**3. B04000000503**

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:

**KOSOY, BRIAN D**

Name

**ONE NORTH CLEMATIS ST., STE. 305**

Address

**WEST PALM BEACH FL 33401 US**

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.  
by its General Partner, SC (Westland Promenade) Inc.

**/s/Robert S. Green**

Signature of General Partner Robert S. Green, VP

*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 of Registered Agent

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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