## BU6000000430

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**B.** KOHR

MAR 1 2 2009

EXAMINER



CORPORATION SERVICE COMPANY ACCOUNT NO. : 07210000032

REFERENCE : 904355

AUTHORIZATION :

COST LIMIT :

ulbele man

ORDER DATE: February 25, 2009

ORDER TIME : 9:28 AM

ORDER NO. : 904355-152

CUSTOMER NO: 7443152

## CHANGE OF AGENT

NAME: SANFORD L.P.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

EXAMINER'S INITIALS:

## 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.

Name of Limited Partnership of	or Limited Liability Limited Partnership
211-30-2006	3. B0600000430
Date of filing/registration in Florida	Florida document number
4. The name of the registered agent and the regist Department of State:	stered office address as shown on the records of the Florida
C T Corporation S	System
	Name
1200 South Pine Is	sland Road
	Address
Plantation, FL 303	328
City,	State and Zip
5. The name and Florida street address of the nev	w registered agent and/or office:
Corporation Service	ce Company $\mathcal{D}_{\mathcal{O}}$
<del></del>	Name 9r
1201 Hays Street	A P
Florida street addre	ss (P.O. Box not acceptable)
Tallahassee	<sub>FL</sub> 32301
City,	State and Zip
Signature of General Partner  I hereby accept the appointment as registered age comply with the provisions of all statutes relative and I am familiar with an accept the obligations of Corporation Service Company  By:  Signature of Registered AgenMichelle R. V	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent.
Filing Fee: \$35.00 Certified Copy (optional): \$52.50	