

Bo7000000255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

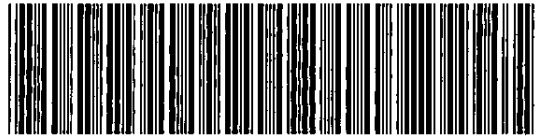
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/07/09--01029--026 **35.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 DEC - 7 PM 12:06

T. HAMPTON

DEC - 8 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations
SUBJECT: DCG TAMPA, L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: B07000000255

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

DENISE BELL

(Contact Person)

NATIONAL CORPORATE SERVICES LLC

(Firm/Company)

16055 SPACE CENTER BLVD., STE. 235

(Address)

HOUSTON, TX 77062

(City, State and Zip Code)

For further information concerning this matter, please call:

DENISE BELL

(Name of Contact Person)

at (800) 862-5438

(Area Code and Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

INHS04 (01/06)



NATIONAL

Corporate Services, LLC

December 4, 2009

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

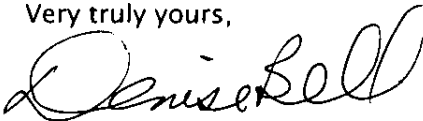
RE: DCG Tampa, L.P.

Dear Filing Officer:

Please file the attached Change of Registered Agent for the referenced company.
Enclosed please find a check for the requisite fees. Please return evidence of filing to
my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the
undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,



Denise Bell
Assistant Secretary

Encl.



**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. DCG TAMPA, L.P.
Name of Limited Partnership or Limited Liability Limited Partnership

2. 08/08/2007 3. B07000000255
Date of filing/registration in Florida 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:

C T 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.

X Michael F. Brown
Signature of General Partner MICHAEL F. BROWN, CFO OF GP
DC DEVELOPERS - TAMPA PARKLAND, INC.

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 an accept the obligations of my position as registered agent.

NRAI Services, Inc.

by: Denise Bell
Signature of Registered Agent Denise Bell, Asst. Secy.

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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