

B9300000512



ACCOUNT NO. : 072100000032

REFERENCE : 184034 5048229

AUTHORIZATION :

Patricia P...

COST LIMIT : \$35.00

01 NOV -5 AM 8:59
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : October 24, 2001

ORDER TIME : 2:43 PM

ORDER NO. : 184034-755

CUSTOMER NO: 5048229

900004666889--4

CUSTOMER: Mr. Ron Burgess
Glimcher Realty Trust
20 South Third Street
Columbus, OH 43215

CHANGE OF AGENT

NAME: GLIMCHER PROPERTIES
LIMITED PARTNERSHIP

RECEIVED
01 NOV -5 PM 4:00
DIVISION OF CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

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. GLIMCHER PROPERTIES LIMITED PARTNERSHIP
Name of the limited partnership

2. November 24, 1993 Date of filing/registration in Florida
3. B9300000512 Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

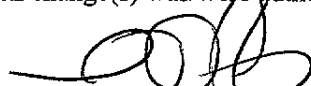
C T Corporation System
Name
1200 South Pine Island Road
Address
Plantation, FL 33324
City, State and Zip

5. The name and address of the new registered agent and/or office:

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box not acceptable)
Tallahassee FL 32301
City, State and Zip


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TALLAHASSEE, FLORIDA

6. Such change(s) was/were authorized by the general partners.


Signature of General Partner George Schmidt, Ex. V.P. & Sec. of Glimcher Properties Corporation,
General Partnership

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Corporation Service Company


Signature of Registered Agent Carol K. Dolor, Assistant Vice President

**Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**