Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name ; C T CORPORATION SYSTEM

Account Number : FCA000000023

: {850}222-1092

Fax Number

: (850)878-5368

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REGISTERED AGENT CHANGE

TEORIDA KEYS FACTORY SHOPS LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

G. MCLEOD

SEP 1 2010

EXAMINER

COVER LETTER

•					
TO: Registration Section Division of Corporations					
SUBJECT: Florida Keys Factory	Shops Limited Partnership				
Name of Limited Partnership or I	Limited Liability Limited Partnership				
DOCUMENT NUMBER: B9400000099					
The enclosed Statement of Change of Registere fee(s) are submitted for filing.	d Office and/or Registered Agent and				
Please return all correspondence concerning this	s matter to:				
Tracy L. Reinholt					
Contact Person					
Simon Property Group	<u> </u>				
Firm/Company					
225 W. Washington St., P.O. Box 70	DATE OF THE PROPERTY OF THE PR				
Address					
indiagon-lin IN 48907 7022	in the second se				
Indianapolis, IN 46207-7033 City, State and Zip Code					
• • • • • • • • • • • • • • • • • • • •					
treinholt@simon.com E-mail address: (to be used for future annual report of					
12-1100: most but fan no men for raine alterest fabout t	Nation (Market)				
For further information concerning this matter, p	dease call:				
Tracy L. Reinholt at (317 y 263-7131				
Name of Contact Person	Area Code and Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the	Florida Department of State.				
STREET ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building P. O. Box 6327					
2661 Executive Center Circle	Taliahassee, FL 32314				
Tallahasses, FL 32301	•				

INHS04 (01/06)

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.

	Keys Factory S miled Partnership or I				
2. 03/16/1994 Date of filing/registration in Florida		3	B94000000099		
		_	Plorida document number		
4. The name of the registered a Department of State:	agent and the registere	ed office address as	shown on the records of the Fi	lorida	
	: NRAI Se	rvices, Inc.			
		firme		•	
•	2731 Executive I	Park Drive, Sul	ite 4		
	Ad	dress			
Weston, FL 33331			need.		
City, State and Zip				<u>≥</u>	ē
5. The name and Florida street	address of the naw re	gistered agent and/	or office;	im c 3•2	AU
	CT Corpora	tion System		34. Jan.	G C
Name					-
1200 South Pine Island					H
'n	orida streol address (I	O. Box not accup	uble)	L. 60	2
	Plantation	FL	33324		HI IO. UB
	City, Stat	e and Zip		₩	•
6. Such change(s) is/are effective	we when filed by the F	lorida Department	of State.	,	
GENERAL PARTNER: PRIME OUTLETS MORTGAGE B	orrower op, llc,	Dolowers limited in	ability company		
By: Andonell	Jamos M. B	erkley, Secretary			
I hereby accept the appointment comply with the provisions of all and I am fifnillar with an accept	statutes relative to th	e proper and comp	lets performance of my duties.	•	
1/2		Kimberly Br	emino		
Signature of Registered Agent		Assistant Se			
	> _	crostorant of	civialy		
Filing Fee:	\$35,00				
Certified Copy (optional):	S 52.50				