## 3950000011

CORPORATION(S) NAME West Boca Acquisition Limited Partnership 700005097907-\*\*\*\*\*35.00 \*\*\*\*\*35.00 () Profit () Amendment () Merger () Nonprofit () Foreign () Dissolution/Withdrawal () Mark () Reinstatement () Limited Partnership () Other () Annual Report ()LLC () Name Registration (x) Change of RA () Fictitious Name () UCC () Certified Copy () Photocopies () CUS () Call When Ready () Call If Problem () After 4:30 (x) Walk In () Will Wait (x) Pick Up () Mail Out Name 3/12/02 Order#: 5121170 Availability Document kf Examiner

> \$ :TANGRON OF CORPORATIONS & STATE BUILDING STATE

Ref#:

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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

Updater

Verifier\_

W.P. Verifier

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## 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 organized under the laws of the state of Delaware , submits the  |
| following statement in order to change its registered office or registered agent, or both, in the state of   |
| Florida.   |
|  |
| 1. West Boca Acquisition Limited Partnership   |
| Name of the limited partnership  |
| 2. 3/30/1995 3. B95000000119 5/3 7   |
| Date of filing/registration in Florida  Document number assigned:  |
| 4. The name and address of the present registered agent and office:  |
| The Prentice-Hall Corporation System   |
| 1201 Hays Street, Suite 105  |
| Tallahassee, FL 32301  |
| 5. The name and street address of the successor registered agent and office: (P.O. Box <u>not</u> acceptable)  |
| C T Corporation System   |
| c/o C T Corporation System, 1200 South Pine Island Road  |
| Plantation, Florida 33324  |
| Such change was authorized by the general partners.  |
| (int Lead 2/12/02  |
| Signature of General Partner Date  |
| Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, 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 obligation of my position as registered agent. |
| Registered Agent signature ASS. Ser Date   |

Filing Fee: \$35.00

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

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