

908 North Gadsden Street
Tallahassee, Florida 32303-6316

2 (850) 224-8685
Fax (850) 224-1254

SECRETARY OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE FL 32314-6327
|||

500002718835--3
-12/22/98--01040--011
***105.00 ***35.00

CM
B95000004125
RACH 256
12-22-98

**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. Royal Gainesville Limited Partnership
Name of the limited partnership

2. 11/28/95 3. B95000000425
Date of filing/registration in Florida 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:

Beth Davis
Name
309 NE 1st Street
Address
Gainesville, FL 32601
City, State and Zip

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

Mr. Elwin Thrasher III
Name
908 N. Gadsden Street
Florida street address (P.O. Box **not** acceptable)
Tallahassee FL 32303
City, State and Zip

FILED
98 DEC 22 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Eric S. Womer
Signature of General Partner

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.

[Signature]
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00