

# B97000000350

CT CORPORATION SYSTEM

CORPORATION(S) NAME

1) ~~HM Fund I Partners, LP~~

2) ~~City Chieftain, LP~~

3) ~~City Chieftain, LP~~

4) ~~City Chieftain, LP~~

5) OM Fund I Partners, LP

6) ~~CSC Over Oaks, Ltd.~~

7) CSC Manhattan Towers, Ltd.

8) ~~CSC Sunset Landing, Ltd.~~

9) ~~City Chieftain, LP~~

02 SEP 27 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Profit              | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger                  |
| <input type="checkbox"/> Nonprofit           |   |  |
| <input type="checkbox"/> Foreign             | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark                    |
|  | <input type="checkbox"/> Reinstatement          |  |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other                   |
| <input type="checkbox"/> LLC                 | <input type="checkbox"/> Name Registration      | <input checked="" type="checkbox"/> Change of RA |
|  | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                     |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Photocopies            | <input type="checkbox"/> CUS                     |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30              |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up      |
| <input type="checkbox"/> Mail Out            |   |  |

Name	Availability
Document	
Examiner	DCC
Updater	
Verifier	DCC
W.P. Verifier	
Verifier	DCC
Judgement	DCC
Verifier	DCC

9/27/02

Order#: 5608567

200008078082--6

-09/27/02--01058--020

Ref#: \*\*\*\*\*295.00 \*\*\*\*\*35.00

Amount: \$

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

**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. OM Fund I Partners, LP

Name of the limited partnership

2. 7/16/97  
Date of filing/registration in Florida

3. B97000000350  
Document number assigned

4. The name and address of the present registered agent and office:

Corporation Service Company

1201 Hays Street

Tallahassee, Florida 32301-2525

5. The name and street address of the successor registered agent and office: (P.O. Box not 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.

Benny Kirby  
Signature of General Partner  
Benny Kirby, Asst. Secretary

9-25-02

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.

[Signature]  
Registered Agent signature

9-25-02

Date

Michael E. Jones  
Assistant Secretary

Filing Fee: \$35.00

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

INHSE004(3/95)