## B97000000518

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DIVISION OF CONTOUNDING

JAMASSEE FLORIDA

FILED

April 29, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re:

Order #: 5840400 SO

Customer Reference 1:

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Aegis Realty Operating Partnership, LP (DE) Change of Agent

Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell Fulfillment Specialist Ashley\_Mitchell@cch-lis.com U3 APR 29 PM 3: U8

660 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 provi	isions of sections 620.105 and 620.1051, Florida Statutes, the undersigned	limited
partnership organized	under the laws of the state of Delaware , sub-	mits the
following statement i	in order to change its registered office or registered agent, or both, in the	state of
Florida.		
1 Aegis Realty Operati	ing Partnership, LP	
	Name of the limited partnership	
2. 9/30/1997	3. B97000000518	
	gistration in Florida Document number assigned	<del></del>
4. The name and addr	ress of the present registered agent and office:	
C	ORPORATION SERVICE COMPANY	
1:	201 HAYS STREET	
T.	ALLAHASSEE FLORIDA 32301	<u>.</u>
5. The name and stree	et address of the successor registered agent and office: (P.O. Box not acceptable	5
<u>C</u>	T Corporation System	03 APR 29 PM
<u>c</u> /	o C T Corporation System, 1200 South Pine Island Road	
<u>P</u>		.,
Such change was author BUBLEDAY 577	orized by the general partners.	3: 08
-A. Mab	4-24-03	<b>5</b> . <b>a</b>
A MARK ADDY, SECRETARY DOUBLEDAY STA	Signature of General Partner  Date  NION LLC AND SOLDWITED LLABILITY COMPANY ITS CENERAL PARTNER  DATE	• • =
Having been named partnership at the pla and agree to act in thi	as registered agent and to accept service of process for the above stated ace designated in this certificate, I hereby accept the appointment as registered is capacity. I further agree to comply with the provisions of all statutes relative performance of my duties, and I am familiar with and accept the obligation	d agent e to the
Claudea		
Cla	Registered Agent signature Date	<del></del> -
As	st. Secretary	

Filing Fee: \$35.00

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

INHSE004(3/95)