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NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment Resignation of R.A. Change of Registere Dissolution/Withdra Merger	ed Agent
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUA  Foreign Limited Partnership Reinstatement Trademark Other	ALIFICATION
CR2E031(7/97)		Examiner's Initials

## 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.

PORT EVERGLADES	S COMMERCE CENTER ASSOCIATES LIMITED PAR	TNERSHTP
	Name of the limited partnership	ZAZIROTITI
2. 10/14/97	- 3 <u></u>	_
Date of filing/registration in Florida	Document number assign	ied
A 701	_	
4. The name of the registered agent and	the registered office address as shown on the	records of the Florida
Department of State.		*•
Ineodore	R. Stotzer, Esq.	e j
	Name	O 34
300 Holl-	ywood Way	F6 2
	Address	<b>≥</b> ? <b>≥</b>
Hollywood	d, Florida 33021	AS I I
	City, State and Zip	
	<b>7</b> ,	் வெ
5. The name and address of the new reg	istered agent and/or office:	AM 9: AM 9: OF STA OF FLOR
Theodore	R. Stotzer, Esq.	御祖 25
	Name	
4651 Sher	ridan Street, Suite 200	_
Florida str	reet address (P.O. Box not acceptable)	
<u>Hollywood</u>	FL 33021	
	City State and Zin	<del>_</del>
6. Such change(s) was/were authorized be port everglades commerce center asso by: sreg port everglades commerce (	ov the general partners. OCIATES LIMITED PARTNERSHIP CENTER, INC., as general partner	
Ву:	·	
Signature of General Partner, Theodore R. St	totzer Eventine Vice President	
familiar with and accept the obligations of	ered agent and agree to act in this capacity. I five to the proper and complete performance of the firm of this definition is registered agent. Or, if this defined address, I hereby confirm that the li	t my duties, and I am
	<u> </u>	
Si Co		*
Signature of Registered Agent , Theodore R.	Stotzer	

Make checks payable to Florida Department of State and mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00