Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000050453 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

: CORPORATION SERVICE COMPANY Account Name

Account Number : I2000000195 : (850)521-1000 Fax Number : (850)558-1575

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

REGISTERED AGENT CHANGE PFI TIMBERFUND I, LP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Mentr MCLEOD

XAMINER

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

PFI TIMBERFUND I, LP

Nai	nc of Limited Partnership o	or Limited Liability Limited Partner	snip	
2. November 7,	1997	3. B97000000602		
Date of filing	registration in Florida	Florida docur	Florida document number	
4. The name of the re Department of State:	gistered agent and the regis	tered office address as shown on the	records of the Florida	
	C T Corporation S	ystem		
		Name	•	
	1200 South Pine Is	land Road		
		Address		
	Plantation, FL 333			
	City,	State and Zip		
5. The name and Flori	da street address of the nev	v registered agent and/or office:		
	Corporation Service	ce Company	_	
		Name	'	
	1201 Hays Street			
•	Florida street addre	ss (P.O. Box not acceptable)		
	Tallahassec	FL 32301		
•	City,	State and Zip		
6. Such change(s) is/a	a Klark	he Florida Department of State.		
		nacle Forest Investments, LLC, its p	general parmer	
comply with the provis and I am familiar with Corporation Sei By:	ions of all staputes relative , an accept the obligations o	nt and agree to act in this capacity. to the proper and complete performs if my position as registered agent. by, Assistant VP		
Filing Fee:	\$35.00			
Certified Copy (or	otional): \$52.50			