

B98000000019

New Co. Corporate Services, Inc.
Requestor's Name

90 Carol Glospie
Address

350 Fifth Ave., Suite 6017
City/State/Zip Phone #

New York, NY 10118-6099

500002677935--0

-11/02/98-01087--005

****280.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

FILED
98 NOV -2 PM 4: 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

B98-19

Name	OR 11-9
Availability	
Document	OR
Examiner	
Updater	OR
Updater	OR
Verifier	
Acknowledgment	OR
W. P. Verify	

**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. TST GATEWAY CENTER LIMITED PARTNERSHIP
Name of the limited partnership

2. 1/4/98 3. B98000000019
Date of filing/registration in Florida Document number assigned

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

Corporation Service Company
~~THE PRENTICE HALL CORPORATION SYSTEM, INC.~~

1201 HAYS STREET, SUITE 105

TALLAHASSEE, FLORIDA 32301

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

NRAI SERVICES, INC.

526 E. PARK AVENUE

TALLAHASSEE, FLORIDA 32301

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TALLAHASSEE, FLORIDA

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Such change was authorized by the general partners.

By: Tishman Speyer/Travelers Associates, its general partner

By: TSCE Real Estate Venture, L.P., a general partner

By: TSCE Venture Corp., its general partner

[Signature]
Signature of General Partner

10/27/98
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.

NRAI SERVICES, INC.

[Signature]
Registered Agent signature

10/28/98
Date

DELIA TALIENTO, ASST. SEC'Y

Filing Fee: \$35.00

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