B980000000 85

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Ві	siness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		1/2/al
	Office Use Only	, Myo



800039191258

07/19/04--01060--008 **830.00

OH JUL 19 AM 10: 43



Please return evidence of filing in the SASE enclosed. If you have any questions, please call. Thanks!

New York, NY

Albany, NY

Dover, DE

Los Angeles, CA

SEARCH REQUEST FORM

Date:

7/16/2004

To:

FL Department of State -- Division of Corporations

Phone No.: 850-488-9000

From:

Amy Brown / abrown@nationalcorp.com

Please refer to the following reference number on your invoice: # MO:

Entity Name(s)

BVT CAPITAL PARTNERS III, LP BVT CAPITAL PARTNERS VIII, LP BVT CAPITAL PARTNERS XI, LP BVT CAPITAL PARTNERS XIV, LP BVT CAPITAL PARTNERS XIX, LP BVT CAPITAL PARTNERS XVI, LP BVT CAPITAL PARTNERS XVIII, LP BVT CHAPEL HILLS, LTD. BVT DEVELOMENT CORPORATION II BVT DEVELOPMENT CORPORATION IV BVT DEVELOPMENT PARTNERS II, L.L.P. BVT DEVELOPOMENT CORPORATION

BVT INSTITUTIONAL INVESTMENTS, INC. BVT REAL ESTATE DEVELOPMENT, INC.

CLAY-FRY PROPERTIES, INC.

NATIONAL CAPITAL PARTNERS, INC.

NATIONAL PARTNERS, L.P.

U.S. RETAIL INCOME FUND IV, LP

U.S. RETAIL INCOME FUND V, LP

U.S. RETAIL INCOME FUND VI, LP U.S. RETAIL INCOME FUND VII, LP

U.S. RETAIL INCOME FUND VIII, LP

U.S. RETAIL INCOME FUND VIII-B, LP

U.S. RETAIL INCOME FUND VIII-C, LP

Type of Service(s): Change of Agent Filing

Jurisdiction: Secretary of State, FL

** ADDITIONAL COMMENTS **

Filing fees and Return Envelope (postage paid) attached.

PLEASE call or e-mail before rejecting documents (or with any other questions you may have)

If you have any questions concerning what to report to NCR, please contact us before sending results.

> 1107 9th Street, Suite 830 Sacramento, CA 95814 Phone: 916-326-5235 Fax: 916-326-5239

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.

1.U.S. Retail Income Fund VI, Limited Partnership	
Name of the limited partnership	
2.2/3/1998 Date of filing/registration in Florida 3.B98000000085 Document number assigned	
4. The name of the registered agent and the registered office address as shown on the rec Department of State:	ords of the Florida
CT Corporation System Name	- t
	04 JUL 19 ALLAHASS
1200 South Pine Island Road	F: =
Address	E F
Plantation, FL 33324	Sign 10 17
City, State and Zip	m: 3
5. The name and address of the new registered agent and/or office:	JUL 19 AM 10: 43 AHASSEE FLORIDA
NATIONAL CORPORATE RESEARCH, LTD.	∰: ა
Name	3*
103 N. Meridian Street Florida street address (P.O. Box not acceptable)	
Tallahassee FL 32301	
City, State and Zip	
6. Such change(s) was/were authorized by the general partners.	
BVT Institutional Investments, Inc., General Partner	
M. Scott Wearn	
Signature of General Partner By: M. Scott Weave - Secrety! I hereby accept the appointment as registered agent and agree to act in this capacity. I furth with the provisions of all statutes relative to the proper and complete performance of manifiar with and accept the obligations of my position as registered agent. Or, if this document to reflect a change in the registered office address, I hereby confirm that the limit been notified in writing of this change.	nv duties, and I am
National Corporate Research, Ltd.	
any Brown	
Signature of Registered Agent By: Amy Brown, Asst. Secretary	

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