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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.

1	GAINESVILL	E PROPER	TIES,	L.P.			
N	lame of Limited Partnership o	r Limited Lia	bility L	imited Partner	ship		
2.	03/27/1998		3	B9800	00000185		
Date of filing/registration in Florida			Florida document number				
4. The name of the Department of State	registered agent and the regist	tered office ad	dress A	is shown on th	e records of the	: Florida	
	LEXIS DOCUM	MENT SERV	ICES	INC.			
		Name			-	\sum_{G}	20
	1201 HAYS STR						3
		Address			•	£	¥
	TALLAHASSEE	FL		32301		A.S.	2010 JAN 29
	City.	State and Zip			-	SE.	ت
5. The name and Fig.	orida street address of the new	v registered ng	ent and	d/or office:		ليو للد (13)	PH
		•				(S)	ເມ
	National Corpora	Name	ÇN, L	to., inc.	-	35	3: 54
						>	Ţ
		Park Ave		1.11.1	-		
	Florida street addres	is (P.O. Box n	of acce	eptable)			
	Tallahass	ee	FL	32301	•		
	City,	State and Zip					
6. Such change(s) is	are effective where filed by the	he Florida Dep	artme	nt of State.			
) Las	7					
Signature of General	Pariner Gaircaville Pro						
(By: Richard Fe appointment as registered age.				1 6 milion agus		
	appoiniment as registered age. visions of all statutes relative i						
	th an accept the obligations of	f my position of	as regi	stered agent.			
Signature of Register	fed Agent	VPB	NC.	μ			
Filing Fee:	\$35.00						
Certified Copy (optional): \$52.50						

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

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{ .		GAINESVILLE	PROPER	TIES, L	.P			
	Name of Limit	ed Purmership or	Limited Lia	bility Li	mited Partnershi	p		
2.	03/27/1998	3	:	3.	B980000	00185		
	Date of filing/registration	in Florida	· ·	· ·	Florida docume	nt number		
	name of the registered ago iment of State;	nt and the registe	red office ad	ldress as	shown on the re	cords of the Florida		
	L	EXIS DOCUM	ENT SERV	ICES IN	łC.			
			Name					
		1201 HA	YS STREE	ΞŢ		TA ₂	20	
			ddress			75	5	
	TALLA	HASSEE	FL		32301	Ar.	JAN	•
		City, S	tate and Zip			SS	129	-
5. The	name and Florida street ad	dress of the new	registered ag	ent and/	or office:	E. O.		ſ
	Natio	nal Corporat	te Resear	ch, Lt	d., Inc.		PH	j :
		1	Name			XX	င့်ပ	(
		515 East	Park Ave	nue		DA CE	45	
	Flor	ida street address			table)			
		Tallahasse	ė	FL	32301			
		City, S	tate and Zip		•			
6. Suc	th change(s) is/are effective	wheeliled by the	Florida Der	partment	of State.			
		LAA	7					
Signati		reaville Prop Richard Fe			ent			
i hereb	y accept the appointment as	s registered ageni	and agree (o act in	this capacity. 1)	further agree to		
comply	with the provisions of all some familiar with an agreept to	iatules relative to	the proper a	and com	plete performant ered agent	ce of my duties,		
anari a	im familiar with an acceptat	haile	my pissiion i	UCL	erea ageni.			
Simon	ure of Registered Agent	many 1	VIB	NON				
O IB (IB)	TIT OF ICE STOPEN	V						
Filing		\$35.00						
Certif	fied Copy (optional):	\$52.50						