B99000000044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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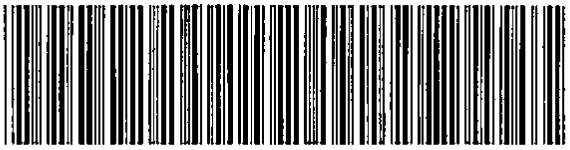

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: High Properties, L.P.
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: B99000000044

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Contact Person

Harbor Compliance
Firm/Company

1830 Colonial Village Lane
Address

Lancaster, PA 17601
City, State and Zip Code

twarco@high.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harbor Compliance at (717) 431-9037
Name of Contact Person — Area Code and Daytime Telephone Number

Enclosed is a $35.00 check made payable to the Florida Department of State.

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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. HIGH PROPERTIES, L.P.
Name of Limited Partnership or Limited Liability Limited Partnership

2. 01/29/1999
Date of filing/registration in Florida

3. B99000000044
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T CORPORATION SYSTEM
Name

1200 SOUTH PINE ISLAND ROAD
Address

PLANTATION, FL 33324
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

REGISTERED AGENTS INC.
Name

3030 N. Rocky Point Drive, STE 150A
Florida street address (P.O. Box not acceptable)

Tampa FL 33607
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Terry A. Warren
Signature of General Partner

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 an accept the obligations of my position as registered agent.

Bill Havre/Assistant Secretary
Signature of Registered Agent Name

Filing Fee: $35.00
Certified Copy (optional): $52.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA