B99 00000013)

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



300039191123

pr 19 m4 | 01060 - 008 | **830.00

OH JUL 19 MHID: 23

RESEARCH,LTD.

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

Albany, NY

Dover, DE

Los Angeles, CA

SEARCH REQUEST FORM

Date:

7/16/2004

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: # M01

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.

Name of the limited partnership		
2.3/19/1999 Date of filing/registration in Florida 3.B9900000131 Document number assigned		
4. The name of the registered agent and the registered office address as shown on the records of the Department of State: CT Corporation System Name 1200 South Pine Island Road Address Plantation, FL 33324 City, State and Zip	Florid 04 JUL 19	a e
5. The name and address of the new registered agent and/or office: NATIONAL CORPORATE RESEARCH, LTD. Name 103 N. Meridian Street Florida street address (P.O. Box not acceptable)	9 AN 10: 23	THE STATE OF THE S
City, State and Zip 6. Such change(s) was/were authorized by the general partners. BVT Development Corporation, General Partner Signature of General Partner By: M. Scott Waw, Secretary I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to with the provisions of all statutes relative to the proper and complete performance of my duties, of familiar with and accept the obligations of my position as registered agent. Or, if this document is be merely to reflect a change in the registered office address, I hereby confirm that the limited partner been notified in writing of this change. National Corporate Research, Ltd. Signature of Registered Agent By: Amy Brown, Asst. Secretary	and I a eino file	m ed

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