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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 813709 4354355

AUTHORIZATION : *Patricia Kigut*

COST LIMIT : \$ 35.00

ORDER DATE : July 21, 2004

ORDER TIME : 10:23 AM

ORDER NO. : 813709-780

CUSTOMER NO: 4354355

CUSTOMER: Ms. Denise L. Spurgin
Trammell Crow Company
3400 Trammell Crow Center
2001 Ross Avenue
Dallas, TX 75201

CHANGE OF AGENT

NAME: TC DEERWOOD COMMERCE CENTER LP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Carla E. Lohi

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**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. TC DEERWOOD COMMERCE CENTER LP

Name of the limited partnership

2. December 28, 1999

Date of filing/registration in Florida

3. B99000000470

Document number assigned

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

LexisNexis Document Solutions Inc.

Name

1201 Hays Street

Address

Tallahassee, FL 32301

City, State and Zip

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

Corporation Service Company

Name

1201 Hays 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.

Laura R. Dunlap

Signature of General Partner

Laura R. Dunlap, Attorney in Fact

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 obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Corporation Service Company

Carla Lohi

Signature of Registered Agent

Carla Lohi
Asst. Vice President

**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**

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