

D99000000006



ACCOUNT NO. : 072100000032

REFERENCE : 388809 4354889

AUTHORIZATION :

Patricia Pijet

COST LIMIT : \$ 35.00

ORDER DATE : September 27, 1999

ORDER TIME : 10:11 AM

ORDER NO. : 388809-015

500003002715--0

CUSTOMER NO: 4354889

CUSTOMER: Ms. Christine Hebert
Cabot Industrial Trust
2 Center Plaza
Ste. 200
Boston, MA 021081906

CHANGE OF AGENT

NAME: CABOT INDUSTRIAL TRUST

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Mimi Stephens

FILED
99 OCT -1 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
99 OCT -1 PM 12:12
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

*RA Agent/ change
office*

S. PAYNE OCT 4 1999

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH**

1. The name of the trust is: CABOT INDUSTRIAL TRUST

2. The mailing address of the trust is: Two Center Plaza, Suite 200
Boston, MA 02108

3. Date of incorporation/qualification: 02/05/1999 Document number: D990000000006

4. The name and address of the current registered agent and office:

C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Deborah L. Parcello
(Signature of an officer, chairman or vice chairman of the board)
Deborah L. Parcello
VP - Controller
(Printed or typed name and title)

9/29/99
(Date)

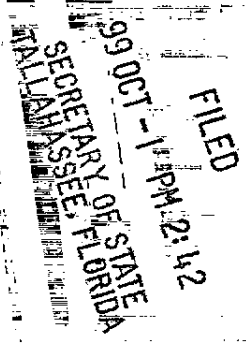
Having been named as registered agent and to accept service of process for the above stated trust I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

By: Kathrine Jean LeBlanc 9/30/99
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

Kathrine Jean LeBlanc Assistant Vice President
(Typed or Printed Name) (Capacity)

*** FILING FEE: \$35.00 ***



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Deborah L. Parol

(Signature of an officer, chairman or vice chairman of the board)

Deborah L. Parol
VP - Controller

(Printed or typed name and title)

9/29/99

(Date)

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By: Kathrine Jean LeBlanc

(Signature of Registered Agent)

9/30/99

(Date)

If signing on behalf of an entity:

Kathrine Jean LeBlanc

(Typed or Printed Name)

Assistant Vice President

(Capacity)

*** FILING FEE: \$35.00 ***