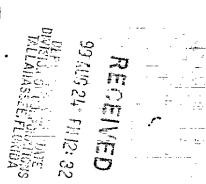
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. ACCOUNT NUMBER	:_FCA000000005	
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CORPORATION NAME	:EQR-CASA Cortez 1/i	stys, Inc.
Document number:		
AUTHORIZATION:	C. Woodinged	
CERTIFIED CO	PY (1-9) OF STATUS (1-0)	
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C. COULLIETTE AUG 2 4 1999



Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

undersigned corporation organized under the laws of the St	ate ofIllinois
submits the following statement in order to change its regist	ered office or registered agent, or both, in the
State of Florida.	·
1. The name of the corporation is: EQR- CASA Cortez Vi	stas, Inc.
	The second secon
2. The mailing address of the corporation is: 2 North Ri	verside Plaza, Chicago, IL 60606
	Administration of the second o
3. Date of incorporation/qualification: 7/6/93	Document number: F93000003086
4. The name and address of the current registered agent and c	office:
The Prentice-Hall Corporation Syste	9 S S
1201 Hays Street, Suite 105	AHAS AGE
Tallahassee, FL. 32311 5. The name and address of the new registered agent and office	e: (P. O. Box Not Acceptable)
LEXIS Document Services Inc.	
3953 WW Kelley Road	75. 4
Tallahassee, FL 32311	
The street address of its registered office and the street addressent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by authorized by the board.	its board of directors or by an officer so
	8/18/89
(Signature of an officer, chairman or vice chairman of the box	ard) (Date) -
Ann Schneider, Sec	8/10/99
(Printed or typed name and title)	(Date)
Having been named as registered agent and to accept servi corporation, I hereby accept the appointment as registered I further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and accept registered agent.	ce of process for the above stated agent and agree to act in this capacity.
_ llethon Whachy	8/18/99
(Signature of Registered Agent) If signing on behalf of an entity:	(Date)
Lexis Document Services Inc.	
(Typed or Printed Name)	(Capacity)
CR2E045(4/95)	FILING FEE: \$35.00