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DIVISION OF CORPORATIONS



ACCOUNT NO. : 072100000032

REFERENCE : 769617 5175346

AUTHORIZATION *Patricia Pizoto*

COST LIMIT : \$ 35.00

ORDER DATE : October 3, 2002

ORDER TIME : 9:41 AM

ORDER NO. : 769617-015

CUSTOMER NO: 5175346

CUSTOMER: Ms. Ashley Ivester
Gables Realty United
2859 Paces Ferry Road
Suite 1450
Atlanta, GA 30339

CHANGE OF AGENT

NAME: GABLES GP, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Texas submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : GABLES GP, INC.

2. The mailing address of the corporation :

2859 Paces Ferry Road, Suite 1450, Atlanta, GA 30339

3. Date of incorporation/qualification: October 4, 1996 Document number: F9600000518

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

C T Corporation System

1200 South Pine Island Road

Plantation, Florida 33324

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(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.

Craig L. Ivester
(Signature of an officer, chairman or vice chairman of the board)

10/31/02
(Date)

Ashley L. Ivester, Vice President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Cynthia L. Harris
(Signature of Registered Agent)

11/5/02
(Date)

If signing on behalf of an entity:

**Cynthia L. Harris
as its agent**

(Typed or Printed Name)

(Capacity)

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