

F97000002927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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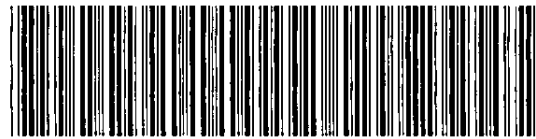
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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2010 JAN 27 PM 4:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PR
1/28/10



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 265218 7375564

AUTHORIZATION

[Handwritten signature]

COST LIMIT : \$35.00

ORDER DATE : January 27, 2010

ORDER TIME : 3:20 PM

ORDER NO. : 265218-015

CUSTOMER NO: 7375564

CHANGE OF AGENT

NAME: DIM VASTOGED, N.V.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS: _____

• 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, this statement of change is submitted for a corporation organized under the laws of the State of OC in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DIM Vastoged, N.V.
2. The principal office address: _____
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/05/1997 Document number: F97000002927
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

DBR & Associates LLC

1 Financial Plaza, Suite 2001

Ft. Lauderdale, FL 33394

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

Corporation Service Company

1201 Hays Street

(P.O. Box NOT acceptable)

Tallahassee, FL 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, or the corporation has been notified in writing of the change.

(Signature of an officer or director)

By: Equity One Realty + Management FL, Inc., authorized agent

(Printed or typed name and title)

By: Arthur L. Gallagher, VP + Sec.

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

By:

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

Carina L. Dunlap
Asst. Vice President

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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