

LO1000010640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

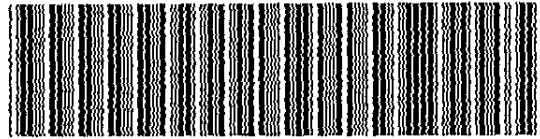
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000021264560

STATE  
DIVISION OF  
TALLAHASSEE, FLORIDA

03 JUL -3 PM 2:42

RECEIVED

LO1-10640  
OK

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 JUL -3 AM 8:36

FILED



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 060925 7375564

AUTHORIZATION :

COST LIMIT : \$ 25.00

*Patricia Pizote*

ORDER DATE : April 21, 2003

ORDER TIME : 12:11 PM

ORDER NO. : 060925-645

CUSTOMER NO: 7375564

CUSTOMER: Arthur L. Gallagher  
Equity One, Inc  
1696 N.e. Miami Gardens Drive

North Miami Bea, FL 33179

CHANGE OF AGENT

NAME: UIRT GP, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT#

EXAMINER: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 JUL -3 PM 8:36

FILED

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company 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 limited liability company is: UIRT GP, L.L.C.

2. The mailing address of the limited liability company is : \_\_\_\_\_

1696 NE Miami Gardens Drive, North Miami Beach, FL 33179

June 29, 2001

L01000010640

3. Date of filing/registration in Florida

4. Document number

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

Alan J. Marcus

Name

20803 Biscayne Blvd

Address

Aventura, FL 33180

City, State and Zip

6. 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

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Laura R. Dunlap

(Signature of a member or authorized representative of a member)

Laura R. Dunlap, Attorney in Fact

(Printed or typed name of signee)

*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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Jeanine Reynolds  
(Signature of Registered Agent)

**Jeanine Reynolds**

**as its agent**

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

FILED  
JUN 29 2001  
TALLAHASSEE, FLORIDA  
8:36