



THE UNITED STATES
CORPORATION
COMPANY

MO00000001797

ACCOUNT NO. : 072100000032

REFERENCE : 170634 5033759

AUTHORIZATION

Patricia Piquet

COST LIMIT : \$ 25

ORDER DATE : June 1, 2001

ORDER TIME : 10:44 AM

ORDER NO. : 170634-050

CUSTOMER NO: 5033759

CUSTOMER: Mr. Stephen D. Sokop
Flag Wharf, Inc.
197 Eighth Street
Suite 800
Charlestown, MA 02129

300004375862--7

CHANGE OF AGENT

NAME: FWI 7, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

01 JUN -7 PM 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVAL
AND
FILED

VB
6-7-01

**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: FWI 7, LLC
2. The mailing address of the limited liability company is : c/o Flag Wharf Inc.
197 Eighth St., Suite 300, Boston, MA 02129

SEPTEMBER 6, 2000

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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:

CT CORPORATION SYSTEM

Name

1200 SOUTH PINE ISLAND ROAD

Address

PLANTATION, FLORIDA 33324

City, State and Zip

6. The name and address of the new registered agent and/or office:

Corporation Service Company

Name

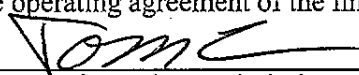
1201 Hays Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32301

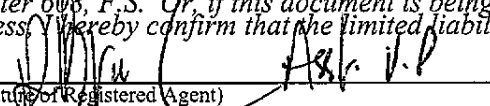
City, State and Zip

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.


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

THOMAS J. CANNON, III
(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.


(Signature of Registered Agent)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED