

Division of Corporations
Florida Department of State
409 E. Gaines Street (Zip Code 32399)
P. O. Box 6327
Tallahassee, FL 32314

FR: Gary Sherman DATE: January 22, 2002

RE: Capital Properties IX L.P.

Lepercq Corporate Income Fund L.P. Lepercq Corporate Income Fund II L.P. Sweetwell Industrial Associates L.P.

Lex GP I Inc.

Acquiport Lake Mary 550 LLC Acquiport Lake Mary 600 LLC

Net 2 Ocala L.L.C.

REFERENCE: 00600S

700004864517--3 -02/04/02--01075--008 \*\*\*\*\*35.00 \*\*\*\*\*35.00

## PLEASE FILE THE ATTACHED

Change of Registered Agent

A check in the amount of \$ 35.00 is enclosed for each filing.

## PLEASE OBTAIN THE FOLLOWING EVIDENCE:

One Filed stamped copy

Please call Gary Sherman at 800-300-5067 if there are any problems with this filing.

Please Return Evidence By Regular Mail to: Gary Sherman CONTINENTAL CORPORATE SERVICES, INC. 189 FRANKLIN AVENUE, SUITE 1 NUTLEY, NJ 07110 PHONE: 800-300-5067 FAX: 973-542-0313

Thank you.

FILED

2002 FED -4 PH 3: 54

104 STANDARD FORM
104 ALLAHASSEE, FLORIDAS

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## 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.

agent, or both, in the State of Florida.		•				
. The name of the limited liability company is: Acquiport Lake Mary 600 LLC						
2. The mailing address of the limited liability con	mpany is: 355 Lexington Avenue, New York, NY 1	0017				
September 26, 2000	M0000001980					
3. Date of filing/registration in Florida	4. Document number					
5. The name of the registered agent and the regist Florida Department of State:	tered office address as shown on the records of t	he				
CT Corporation System	ı					
	Name					
1200 South Pine Island	Road Address LA					
-	Address 5 5					
Plantation, Florida 3332		1]				
City,	State and Zip	f T				
6. The name and address of the new registered ag	gent and/or office:					
NRAI Services, Inc.	်ရှူ <sup>ည်</sup> မှ					
526 E. Park Avenue	Name SD 51					
Florida street address	s (P.O. Box NOT acceptable)					
Taliahassee	FL 32301					
City, St	tate 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.

By:	_Acquiport	600 Manager L	LC, Manager/Member		
(Sig	nature of a membe	er or authorized represen	tative of a member)	•	
	1/1-	P	- 1 100		
By:		and	1/15/02		
(Pri	nted or typed nam	cofspence) Patric	k Carroll, Manager		
con ana Cha ada NR	aply with the f I I am familian apter 608, F.S iress, I hereby Al Serves. Inc	the appointment as provisions of all story with and accept to the confirm that the loce.		per and complete per ition as registered as	ient as provided for in
(Sig	nature of Registor	ed Agent)	Acct Cars	,	
(218	nature of Kegiston	ed Agent)	- DEET, SEES		

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

**FILING FEE: \$25.00**