M03000003864

(Requestor's Name)		
		
(Address)		
(AC	ldress)	
(Cir	ty/State/Zip/Phone	: #)
ζ		,
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		\$
		<u> </u>

Office Use Only



700041558867

ZEBY DCT 20 PH 1: 1: 3

J. BRYAN UC) 2 2 2004

Registered Agents Legal Services, LLC

1220 N. Market Street Suite 606 Wilmington DE 19801 (302) 427-6970 (800) 400-6650 (302) 421-5753 [fax] info@lnclegal.com [email] www.lncLegal.com

REMOCIO ON 1.45

Rectober 19, 2004

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

RE: Prime Outlets Mortgage Borrower GP, LLC

Dear Sir or Madam,

Please find enclosed the Statement of Change of Registered Agent for the above referenced LLC along with our check for your filing fee. Please file and return filed documents to the following address:

Registered Agents Legal Services, LLC Attn: Denise Fowler 1220 N. Market Street, Suite 606 Wilmington, DE 19801

Please feel free to contact me with any questions at 800-400-6650. Thank you.

Sincerely,

Denise Fowler Accounts Manager

enve fourer

Enclosures

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: Prime Outlets Mortgage Borrower GP, LLC 2. The mailing address of the limited liability company is: 100 East Pratt Street, 19th Floor, Baltimore, MD 21202 11/18/2003 M03000003864 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: Corpdirect Agents Inc. Name 103 N Meridian St, Lower Level OBY OCT 20 PM 1: 1:3 Address Tallahassee, FL 32301 City, State and Zip 6. The name and address of the new registered agent and/or office: Registered Agents Legal Services, Inc. 1333 North Duval Street Florida street address (P.O. Box NOT acceptable) Tallahassee 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 d' member or authorized representative of a member)

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

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 familial 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 confirmathat the limited liability company has been notified in writing of this change

FILING FEE: \$25.00