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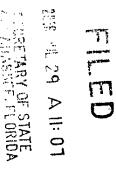
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COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Divi	sion of Corporations					
SUBJECT:	1954 UNIONPORT ASSOCIATES LLC					
50505511	Name of Limited Liability Company					
Dear Sir or N	∕ladam:					
The enclosed	d Registered Agent/Registered Office	Change and	d fee(s) are submitted for filing.			
Please return	all correspondence concerning this m	atter to the	e following:			
MR.BARR	Y GOLDSTEIN					
	Name of Person		- 			
GOLDSTE	EIN COMMERICAL PROPERTIE	ΞS				
	Firm/Company					
3753-1 CA	ARDINAL POINT DRIVE					
	Address					
JACKSON	VILLE, FL 32257					
	City/State and Zip Code		·			
BARRYJO	SOLDSTEIN@BELLSOUTH.NE	٢				
E-mail	address: (to be used for future annual	report noti	fication)			
For further i	nformation concerning this matter, ple	ase call:				
MR.BARR	Y GOLDSTEIN	904	367-0009			
	Name of Person		Area Code & Daytime Telephone Number			
	REET/COURIER ADDRESS: istration Section	R	1AILING ADDRESS: egistration Section			
	ision of Corporations ton Building	Division of Corporations P.O. Box 6327				
266	1 Executive Center Circle ahassee, Florida 32301	Tallahassee, Florida 32314				
		nount.				
	losed is a check for the following an		nee pill in a God of the LG			
☑ \$	25 Filing Fee	u s	\$55 Filing Fee & Certified Copy			

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Na	ame of the limited liability company: 1954 UNION	IPORT	ASSOCIA	TES LLC				
2. (a)	1954 UNIONPORT ASSOCIATES	(_{b)} 1954 UN	NIONPORT AS	SSOCIA	ATES		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		· / 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	60 BROAD STREET -SUITE 3503		60 BRO	AD STREET-	SUITE :	3503		
	NEW YORK, N.Y. 10004	_	NEW YO	ORK, N.Y. 100	04			
	5/10/2004		M040000	01766				
3.	Date of filing/registration in Florida	4.		Document numb	er			
5. (a)	F&L CORP							
ν. («)	Registered Agent and Registered Office shown on the records of ONE INDEPENDENT DRIVE	f the Florid	la Dept. of State	- 9:				
	Registered Office Address (MUST BE FLORIDA STREET) SUITE 1300	ADDRES	<u>(S)</u>	-				
	JACKSONVILLE, FI	L_32202	2	- - - - -	. 2			
(b)	MR. BARRY GOLDSTEIN					STATEMENTS STATEMENTS		
. ,	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	ddress:	الله والريان العد واللوان العد واللوان	ا هي ځ	im		
	GOLDSTEIN COMMERCIAL PROPERTIES			. 51.01	A II: 07 OF STATE F. ELORID	0		
	NEW Registered Office Address:			RIO				
	3753-1 CARDINAL POINT DRIVE			. ,				
	JACKSONVILLE, FI	32257	7					
the cha agent v was/we	imited liability company is not organized under the la nge or changes are made, the Florida street address o vill-be identical. Or, in the case of a Florida limited li- tre authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the regiability of the line	istered office company, it is nited liability	e and the business is hereby confirme by company or as on pany.	s office o	f the registered e change(s)		
Signat	ture of a member or authorized representative of a member			Printed or typed nar	ne of signe	:e		
provisi the obl to mere notified	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I dry writing of this change.	ree to ac e perforn ed for in hereby c	et in this capa nance of my a Chapter 605 confirm that i	acity. I further as duties, and I am f , F.S. Or, if this the limited liabili	zree to co amiliar w documen ty compa	omply with the vith and accept t is being filed my has been		
oign a tu:	e of RegistereorAgent							

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00