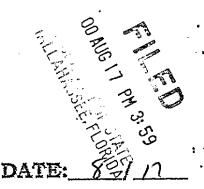
M 07592

Document Number Only

CT Corporation System 660 East Jefferson Street Taliahassee, FL 32301 850-222-1092

(XXX)Walk in



Corporation(s) Name Loclestar Town Orlands , Bri ()Amendment ()Profit (| Nonprofit ()Mark ()Dissolution ()Foreign ()Withdrawal ()LEC ()Other (\Limited Partnership ()UBR ()Fititious Name ()Reinstatement ()UCC () 1 or () 3 ***Special Instructions** 200003360842---1 -08/17/00--01058--004 ()Photocopies ()Certified Copy ()arts/ameds/mergers () Other-See Above

ROW Clarge

(XXX)Pick-up

Please Return Filed Stamped Copies To:

()Will Wait

Jeffrey Butterfield
Thank You!

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the
undersigned corporation organized under the laws of the State of <u>Florida</u> 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 corporation is: Lodestar Tower Orlando, Inc.
2. The mailing address of the corporation is: 100 Regency Forest Drive, Suite 400
Cary, NC 27511
3. Date of incorporation/qualification: 11/9/84 Document number: M07592
4. The name and address of the current registered agent and office:
Paul A. Dickie
Tequesta, FL 33469
and where ± 1
CT Corporation System
1200 South Pine Island Road S
Plantation, FT 33324
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
(Signature of an officer, chairman or vice chairman of the board) (Date)
Glen F. Spivak, President
(Printed or typed name and title) (Date)
Having been named as registered agent and to accept service of process for the above stated corporation, 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 obligation of my position as
registered agent. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
(Signature of Registered/Agent)
If signing on behalf of an entity:
(Typed or Printed Name) ASSISSION (Y(Capacity)
ETI INC FEE: \$25.00
JENNIFER F AULTMAN ASSISTANT SECRETARY
- DECKETARY

L006 - CT System On