8000001378

THE UNITED STATES

ACCOUNT NO. : 072100000032

REFERENCE : 007444

4321791

AUTHORIZATION

ORDER DATE: February 15, 2001

ORDER TIME : 11:58 AM

ORDER NO. : 007444-085

CUSTOMER NO: 4321791

400004085404--0

CUSTOMER: Ms. Lesley V. Benjamin

The Related Companies, Inc. 625 Madison Avenue, 9th Floor

New York, NY 10022

CHANGE OF AGENT

NAME:

PALLADIUM EMPLOYEE COMPANY,

L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Sara Lea

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 submit agent, or both, in the Sta	ts the following statement in order to change its registered tte of Florida.	i office or registered
1. The name of the limit	ted liability company is: PALLADIUM EMPLOYEE COMPANY,	L.L.C.
2. The mailing address (of the limited liability company is: 625 Madison Avenue,	, 5th Floor
	022	*
New TOLK, MI 100		
11/20/1998	M98000001378	
3. Date of filing/registra	ation in Florida 4. Document number	
5. The name of the regis Florida Department o		e records of the
	C T Corporation System	
	Name	-
	1200 South Pine Island Road Address	
		全
	Plantation, FL 33324 City, State and Zip	APPRICAPR 27 APR 27 ECRETARISE LLANASS
6. The name and addres	ss of the new registered agent and/or office:	
	Corporation Service Company	1: 34 STATE ORIDA
	Name	¥m ≠
	1201 Hays Street	
	Florida street address (P.O. Box NOT acceptable)	
	Tallahassee FL 32301	
	City, State and Zip	
and the business office liability company, it is	company is not organized under the laws of the State of Florie change or changes are made, the Florida street address of the of the registered agent will be identical. Or, in the case of a hereby confirmed that the change(s) was/were authorized by nited liability company or as otherwise provided in the article of the limited liability company.	a Florida limited v an affirmative vote of
• -	thorized representative of a member)	
MARtin S. (Printed or typed name of sig	Burger, fresident	I finish ou gaves to
I hereby accept the ap comply with the provis and I am familiar with Chapter 608, F.S. Or address, I hereby conf	ppointment as registered agent and agree to act in this capa sions of all statutes relative to the proper and complete perfo h and accept the obligations of my position as registered age i, if this document is being filed to merely reflect a change in firm that the limited liability company has been notified in w	cuy. I juriner agree to ormance of my duties, mat as provided for in the registered office riting of this change.
(Signature of Registered Age	LPG-	

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

INHS18(10/99)

FILING FEE: \$25.00