ACCOUNT NO. : 072100000032

REFERENCE: 636191 4324011

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: March 23, 2000

ORDER TIME: 10:41 AM

ORDER NO. : 636191-150

900003188009--0

CUSTOMER NO: 4324011

CUSTOMER: Sherry A. Baldwin, Legal Asst

Winstead, Sechrest & Minick

1201 Elm Street

5400 Renaissance Tower

Dallas, TX 75270

CHANGE OF AGENT

NAME: WEC 99C-14 LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Mimi Stephens

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 limite	d liability company is	: WEC 99C-1	4 LLC	· .
2. The mailing address of	the limited liability c	company is: _6	6750 LBJ FREEWAY	, SUITE 1100
DALLAS, TX 75240	_	_		
04/09/1999		· .	м99000000537	
3. Date of filing/registrati	on in Florida		Document numl	per
5. The name of the registe Florida Department of S		istered office a	iddress as shown or	
	CT COR	PORATION SYS	STEM	
		Name		\$25 P
	1200 SOUT	H PINE ISLAN	ND ROAD	FILED MAR 29 PM 1: 2 RETARY OF STAT AHASSEE, FLORI
	•	Address		Es I
PLANTATION, FL 33324 City, State and Zip				원주 2
	City	, State and Zij	?	
6. The name and address of	of the new registered a	agent and/or of	ffice:	
	Composatio	n Comrida C		
	Corporatio	on Service C Name	ompany	.
	1201	Hays Street	_	
•	Florida street addres			-
	Tallahassee	FL	32301	. <u>.</u>
	City,	State and Zip		
If the limited liability com confirmed that after the ch and the business office of liability company, it is her the members of the limite the operating agreement of the limite the operating agreement of the limite.	lange or changes are not the registered agent we have confirmed that the limited liability of the liability o	nade, the Flori vill be identica e change(s) wa as otherwise p company.	da street address of l. Or, in the case of	the registered office
(Signature of a monthber or authori	zed representative of a memb	oer)	• •	
By: WOLVERINE EQUIT	IES COMPANY 99C,	L.P.		
(Printed or typed name of signee)				
I hereby accept the appoil comply with the provision and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered as of all statutes relatively accept the obligation is document is being that the limited liability.	ngent and agre we to the prope ns of my positi filed to merel ity company hi	te to act in this cape or and complete per on as registered ag y reflect a change u as been notified in v	icity. I further agree to formance of my duties, ent as provided for in the registered office writing of this change.
(Signature of Registered Agent)	2 Rippor	[Deborah D. Skippe as its agent	¥
Divisio	n of Cornorations P	O Boy 6327	•	32314

INHS18(10/99)

FILING FEE: \$25.00