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ACCOUNT NO. : 072100000032 REFERENCE : 060925 7375564 AUTHORIZATION COST LIMIT ORDER DATE: April 21, 2003 ORDER TIME : 4:10 PM ORDER NO. : 060925-370 CUSTOMER NO: 7375564 CUSTOMER: Arthur L. Gallagher Equity One, Inc 1696 N.e. Miami Gardens Drive North Miami Bea, FL 33179 CHANGE OF AGENT NAME: HOMESTEAD MARKET CENTER, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY PLAIN STAMPED COPY CONTACT PERSON: Troy Todd -- EXT# 1140 **EXAMINER:**

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

Pursuant to t	the provisions of sections 607.0502, 617.050)2, 607.1508, or 617.	1508, Florida Statutes,
this statement	t of change is submitted for a corporation org	zanized under the law	s of the State of
Florida	in order to change its registered of	fice or registered age	nt, or both, in the State
of Florida.			
1. The name	of the corporation: HOMESTEAD MARKET CENTER	R, INC.	=
2. The princip	cal office address: 1696 NE Miami Gardens D	r, 2nd Fl	3 SECR ALL
,,,,	N. Miami Bch, FL 33179	3	
3. The mailin	g address (if different):		SEC 3
		<u> </u>	FLS &
4. Date of inc	corporation/qualification: May 9, 2002	Document number	er: P02000052580 27
	and street address of the current registered age partment of State:	ent and registered offic	ce on file with the
	Alan J. Marcus	,	
	20803 Biscayne Blvd, Ste 301		
	Aventura, FL 33180	,	
6. The name changed):	and street address of the new registered ag	ent (if changed) and	/or registered office (if
	Corporation Service Company		_
	1201 Hays Street (P.O. Box or personal mailbox NO	T acceptable)	
	Tallahassee, FL 32301	•	
The street add	dress of its registered office and the street ad aged will be identical.	dress of the business	office of its registered
Such change authorized by	was authorized by resolution duly adopted by the board, or the corporation has been notified.	y its board of director ied in writing of the c	rs or by an officer so hange.
Signature of an offi	icer, chairman or vice chairman of the board) Laura	R. Dunlap, Attorne (Printed or typed name an	y in Fact
I further agre performance registered ag	pt the appointment as registered agent and a se to comply with the provisions of all statute of my duties, and I am familiar with and acc ent. Or, if this document is being filed mere s. I hereby confirm that the corporation has	es relative to the prop rept the obligation of i ly to reflect a change	er and complete my position as in the registered
-	(Signature of Registered Agent)	(Date)	
If signing on bel	half of an entity: Jeanine Reynold	s	
	as its agent		<u> </u>
	(Typed or Printed Name)	(Capacity)	

* * * FILING FEE: \$35.00 * * *