

ACCOUNT NO. :

072100000032

REFERENCE :

830433

AUTHORIZATION

COST LIMIT :

ORDER DATE: May 22, 1998

ORDER TIME : 10:40 AM

ORDER NO. : 830433-015

CUSTOMER NO: 4373528

CUSTOMER: Ms. Roddie Brunstrom

The Rouse Corporation 10275 Patuxent Pkwy. (legal Division) Columbia, MD 21044

500002540775--5

CHANGE OF AGENT

NAME: ROUSE-MIAMI, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Lynette Coleman

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

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

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

		2, 617.0502, 607.1508, or 617.1508	8, Florida Statutes, the
		nge its registered office or registere	d agent, or both, in the
-	f the corporation is: ROUSE-MIAM	I, INC.	
2. The mailing	address of the corporation is: 10	275 PĀTUXENT PARKWAY	
COLUMBIA	MD 21044		
3. Date of inco	rporation/qualification: 6/12/84	Document number	: P02380
4. The name ar	nd address of the current registere	ed agent and office:	
	C T CORPORATION SYSTEM		****
	1200 S. PINE ISLAND ROAD	E ISLAND ROAD	
	PLANTATION, FL 33324		98 MAY 29 SECRETARY ALLAHASSI
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)			
	Corporation Service Compar	ny	PM 2: OF ST
	1201 Hays Street		: 34 ORID
	Tallahassee, FL 32301		
The street add	lress of its registered office and ged, will be identical.	the street address of the business of	office of its registered
Such change authorized by	was authorized by resolution du the board.	lly adopted by its board of director	s or by an officer so
(1)	Li Halores	5/2	0/98
(Signatur	e of an officer, chairman or vice chairman	of the board)	(Date)
David R. Schwiesow, VP		5/20	/98
	(Printed or typed name and title		(Date)
Having been in corporation, in I further agree performance of registered age	named as registered agent and i hereby accept the appointment e to comply with the provisions of my duties, and I am familiar	to accept service of process for the tas registered agent and agree to of all statutes relative to the properties and accept the obligation of research	e above stated act in this capacity. er and complete my position as
	1000 Norter	5-26-98	
	(Signature of Registered Agent)	(Date)	
If signing on bel	If signing on behalf of an entity: Carol K. Dolor Authorized Representative		
<u> </u>	(Typed or Printed Name)	(Сара	city)

CR2E045(3/96)