

ACCOUNT NO. : 072100000032

REFERENCE -

258710 9323352 Patricia 144.

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE: February 12, 1997

ORDER TIME : 1:08 PM

ORDER NO. : 258710-055

CUSTOMER NO:

4323352

400002181944--2

CUSTOMER: Ms. Teresa O'neal

Pier 1 Imports, Inc 301 Commerce Street

Suite #600

Fort Worth, TX 76102

CHANGE OF AGENT

NAME:

PACIFIC INDUSTRIAL PROPERTIES,

K (2) (1) (1)

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Debbie Skipper

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 costions 607.0502, 617.0502, 617.0502, 607.0502, 617.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.050	
ta. The name of the corporation is	ANXLINALITY III
1b. The mailing address of the corporation is : 1700 Pace	ific Avenue, Surce 2720,
1c. Date of incorporation: 8-1-91 Docume	ent number: P39139
The name and address of the current registered agent a C T Corporation System	
1200 South Pine Island Road	
Plantation, Florida 33324	
3. The name and address of the new registered agent and o	ffice:(P.O. Box Not Acceptable) ယု 🥻 🥏
Corporation Service Company	
1201 Hays Street	
Tallahassee, Florida 32301	
The street address of its registered office and the street registered agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by so authorized by the board.	its board of directors or by an officer
Halus Ulu	may 12, 1997
(Signature of an officer, chairman or vice chairman of the board)	(Date)
J. Andrey Lourence, Serretoly (Printed or typed name and title)	
Having been named as registered agent and to accept so corporation, Therebyaccept the appointmentas registered I further agree to comply with the provisions of all statut performance of my duties, and I am familiar with and accepts the service company. Corporation Service Company	ervice of process for the above stated agentand agree to actin this capacity. es relative to the proper and complete acept the obligation of my position as
Ledurah K. Skwar	5/16/97
(Signature of Registered Agent)	(Date)
If signing on hehalf of an entity:	
Deberah D. Skipper - (Typed or Printed Name)	Cas agent S (Capacity)

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