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ACCOUNT NO. : 072100000032	
REFERENCE : 421145 7376054	
AUTHORIZATION: latricia lyuto	
COST LIMIT : \$ 35.00	
ORDER DATE : February 2, 2004	
ORDER TIME: 1:31 PM	
ORDER NO. : 421145-735	
CUSTOMER NO: 7376054	
CUSTOMER: Mr Chris A. Price Cbl & Associates Properties, Suite 500	ē.
2030 Hamilton Place Blvd. Chattanooga, TN 37421	
	**
CHANGE OF AGENT	
NAME: THE AVENUES, INC.	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY	
CONTACT PERSON: Carla E. Lohi EXT# 2932	
EXAMINER:	

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

	* *	7.0502, 607.1508, or 617.1508, Florida Statutes, der the laws of the State of Florida		ment of in order
	egistered office or registered agent, c	• • • • • • • • • • • • • • • • • • • •		_111 01 (16)
1. The name of	the corporation: THE AVENUES,	INC.		
2. The principa	l office address: Suite 500, 203	30 Hamilton Place Blvd.		
Chattano	oga, TN 37421-6000	· · · · · · · · · · · · · · · · · · ·		·
3. The mailing	address (if different):			
4. Date of incom	rporation/qualification:	7, 1992 Document number: P92000009875		
	nd street address of the current register artment of State:	ered agent and registered office on file with the		
	CT Corporation System			
	1200 South Pine Island R	oad	_	
	Plantation, FL 33324	<u> </u>	SEC	40
6. The name an (if changed):	_	d agent (if changed) and /or registered office	RETAR'	11-4 B34
	Corporation Service Comp	any	-E-F	- FED
	1201 Hays Street		STA ATS	ယ္က
	(P.O. Box or po	ersonal mailbox NOT acceptable)	司司	42
	Tallahassee, FL 32301			
The street addichanged will b	ress of its registered office and the edidentical.	street address of the business office of its registe	red ager	ıt, as
Such change withe board, or the	vas authorized by resolution duly ache corporation has been notified in	dopted by its board of directors or by an officer writing of the change.	so autho	rized by
Lau	(Signature of an officer or distor)	Laura R. Dunlap, Attorn (Printed or typed name and t		Fact
		ent and agree to act in this capacity. Il statutes relative to the proper and complete pe gation of my position as registered agent. Or, i tered office address, I hereby confirm that the co	erformar this do prporation	nce of my cument is on has
	Service Company	2-4-04		
<u>-1. CC</u>	(Signature of Registered Agent)	(Date)		
If signing on b	chalf of an entity:	Carla Lohi Asst. Vice President		
<u> </u>	(Typed or Printed Name)	(Capacity)		

1. =

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