## P93000039748

| (Requestor's Name)                      |                  |  |  |  |  |
|---|------------------|--|--|--|--|
| (Address)                               | _                |  |  |  |  |
| (Address)                               | _                |  |  |  |  |
| (City/State/Zip/Phone #)                | _                |  |  |  |  |
| PICK-UP WAIT MAIL                       |                  |  |  |  |  |
| (Business Entity Name)                  | _                |  |  |  |  |
| (Document Number)                       |                  |  |  |  |  |
| Certified Copies Certificates of Status | <del>, -</del> . |  |  |  |  |
| Special Instructions to Filing Officer: | 7                |  |  |  |  |
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|   | $\left. \right $ |  |  |  |  |

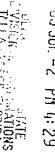
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| N SERVICE COMP | A N Y "   |         |
|----------------|---|---------|
|                |   |         |
|                | ACCOUNT NO. : 0721000000  | 32      |
|                | REFERENCE : 060925  | 7375564 |
|                | AUTHORIZATION : Talucca   | PAKAS   |
|                | COST LIMIT : \$ 35.00   | 00      |
|                |   |         |
| ORDER DATE     | : April 21, 2003  |         |
| ORDER TIME     | : 1:05 PM   |         |
| ORDER NO.      | : 060925-160  |         |
| CUSTOMER N     | O: 7375564  |         |
| CUSTOMER:      | Arthur L. Gallagher<br>Equity One, Inc<br>1696 N.e. Miami Gardens Drive |         |
|                | North Miami Bea, FL 33179   |         |
|                | <b></b>   |         |
|                | CHANGE OF AGENT   |         |
|                |   |         |
|                |   |         |
| NAM            | E: EQUITY ONE (DELTA) INC.  |         |
|                |   |         |
|                |   |         |
|                | URN THE FOLLOWING AS PROOF OF FILTN                                     | JC •    |
| PLEASE RET     |   |         |
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EXAMINER:

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

| Pursuant to t                                  | he provisions of sections 607.05  | 502, 617.0502, 607.1508, or 617.15   | 08, Florida Statutes,                         |
|--|---|--|---|
|  | •   | poration organized under the laws of   |   |
| Florida  | in order to change its re   | egistered office or registered agent,  | or both, in the State                         |
| of Florida.                                    | of the corporation: EQUITY ONE (I   | יאר דאני   | 7. 22   |
|  |   |  |   |
| 2. The princip                                 | oal office address: 1696 NE Miami   | Gardens Drive  |   |
|  | North Miami E   | Seach, FL 33179  | SE -  |
| 3. The mailing                                 | TIC P   |  |   |
|  |   |  |   |
| 4. Date of inc                                 | orporation/qualification: May 27,   | Document number:   | рэзоооозэ743                                  |
|  | and street address of the current repartment of State:  | egistered agent and registered office  | on file with the                              |
|  | Alan J. Marcus Esq.   |  | <u> </u>                                      |
|  | 20803 Biscayne Blvd., Suite   | e 301  |   |
|  | Aventura, FL 33180  |  |   |
| 6. The name changed):                          | and street address of the new re  | egistered agent (if changed) and /or   | registered office (if                         |
| ,  | Corporation Service Company   |  |   |
|  | 1201 Hays Street (P.O. Box or person  | onal mailbox NOT acceptable)   | <del></del>                                   |
|  | Tallahassee, FL_32301   |  |   |
| The street addagent, as char                   | dress of its registered office and t<br>aged will be identical.   | the street address of the business of  | fice of its registered                        |
| Such change authorized by                      | was authorized by resolution dul<br>the board, or the corporation ha  | y adopted by its board of directors of sbeen notified in writing of the cha  |   |
|  | icer, chairman or vice chairman of the board)   | Laura R. Dunlap, Attorney (Printed or typed name and ti  |   |
| I further agre<br>performance<br>registered ag | ee to comply with the provisions (<br>of my duties, and I am familiar v<br>ent. Or, if this document is being | l agent and agree to act in this capa<br>of all statutes relative to the proper<br>with and accept the obligation of my<br>g filed merely to reflect a change in<br>oration has been notified in writing | and complete<br>position as<br>the registered |
| - Jei  | (Signature of Registered Agent)   | (Date)   |   |
| If signing on hal                              | 0 1   | ne Reynolds  |   |
| ii sigimig oii de                              |   | its agent  |   |
|  | (Typed or Printed Name)   | (Capacity)   |   |

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