

15000048136

ACCOUNT NO. : 07210000032

REFERENCE :

COST LIMIT

\$ 35.00

ORDER DATE: August 6, 2001

ORDER TIME : 12:43 PM

ORDER NO. : 393448-185

200004521872--2

CUSTOMER NO:

7175421

CUSTOMER: Ms. Nicolle Donald

The Brisben Companies 7800 East Kemper Road

Cincinnati, OH 45249

CHANGE OF AGENT

NAME:

CORNERSTONE PARTNERS 68, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

08-07-01

CONTACT PERSON: Ellyn Herndon -- EXT# 1145

EXAMINER:

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

Pursuant to the provisions of sections 607.0502, 617.0502 the undersigned corporation organized under the laws of the	State of Florida
submits the following statement in order to change its regist the State of Florida.	
1. The name of the corporation: CORNERSTONE PARTNERS 68	, INC.
2. The mailing address of the corporation: 7800 East Kemp	er Road, Cincinnati Ohio 45249
3. Date of incorporation/qualification: 06/16/1995	Document number: P95000048136
4. The name and address of the current registered agent and of	office:
C T Corporation System	CRE:
1200 South Pine Island Road	ASSET
Plantation, FL 33324	
5. The name and address of the new registered agent (if chan (P. O. Box Not Accept	
Corporation Service Company	6
1201 Hays Street	<u> </u>
Tallahassee, Florida 32301	
The street address of its registered office and the street addragent, as changed, will be identical.	ress of the business office of its registered
Such change was authorized by resolution duly adopted by authorized by the board.	its board of directors or by an officer so
Lich	7/31/01
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Joseph A Faisant, Assistant Secretary	
(Printed or typed name and title) Having been named as registered agent and to accept servi corporation, I hereby accept the appointment as registered I further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and accept registered agent.	ce of process for the above stated agent and agree to act in this capacity. relative to the proper and complete of the obligation of my position as
Deborah D. Skipper	8-3-01
(Signature of Registered Agent)	(Date)
- If signing on behalf of an entity Deborah D. Skipper	
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35.	
	· ·

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314