~P96000064123

zom

September 28, 1998

Division of Corporations

Tallahassee, FL 32314



20M COMPANIES 1950 SUMMIT PARK DRIVE SUITE 300 ORLANDO, FL 32810-5945

-**500002653245--2** -10/01/98--01039--029 ****140,00 *****35,00

RE: Registered Agent Change for: Begovia, Crotonia, Bennetbelle, Mirafaya

Dear Processor:

PO Box 6327

Enclosed are signed "Statement of Change" forms for the above-referenced corporations, changing registered agent name and address. Also enclosed is our check in the amount of \$140.00 to cover the fee.

If you have any questions, please contact me directly.

Thank you.

Sincerely,

Linda Rossel

Partnership Administrator

encl.

BA Clark

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 section 607.0502, 617.0502, 607.1508 or 617.1508, Florida Statutes, the undersigned corporation organized under the law of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

			The state of 1	witau.		
1. The name of the corporatio	n is: BEGOVIA	, INC.				
2. The mailing address of the			uk Drive, Suite 300), Orland	lo, FL	32810
3. Date of incorporation/quali	fication:		Number: P960000			
4. The name and address of the	ie current register	ad accept and accept	_			
Anke Bac	ker	ed agent and on	ice:			
	Office Center			ರ∞	98	
2269 Lee Road				ES	98 OCT	•
	urk, FL 32789			HASSI HASSI	<u> </u>	
5. The name and address of th	e new remistered o	cont and . cc		- Giri	P	
ZOM Pro	perties, Inc.	gent and office:			PAF	1
1950 Sum	mit Park Drive		•	至国	77.	
Orlando, I	FL 32810			SE.		: - ₆₇₈
The street address of its register agent, as changed, will be identicated by a suthorized by the board						d
Signature of the			col 111 lac	2		
Signature of officer, chairman or vice c	hairman of the board		Date	<u> </u>		
Florian von Meiss, Director Printed or typed name and title		· · · · · · · · · · · · · · · · · · ·	•	-		
and this			Date			
Having been named as registered agent appointment as registered agent and agreelative to the proper and complete perfeas registered agent. Signature of Registered Agent	and to accept service ee to act in this capa ormance of my duties,	of process for the city. I further agre and I am familiar	above stated corporation to comply with the provisith and accept the oblinated and Date	n, I hereb ovisions of ligation of	y accept f all stat my post	the utes ition
If signing on behalf of an entity:			Dall			
SAMUEL C. STO DAGE C	TT	-				
SAMUEL C. STEPHENS, 2 Typed or Printed Name Zom	H, PRESIDE	NTOF				
The of Finite Name Com	rkop ertle	s, inc	Capacity			