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ACCOUNT NO. : 072100000032

REFERENCE : 060925 7375564

AUTHORIZATION : Taluc

COST LIMIT : \$ 35.00

ORDER DATE: April 21, 2003

ORDER TIME : 12:17 PM

ORDER NO. : 060925-695

CUSTOMER NO: 7375564

CUSTOMER: Arthur L. Gallagher

Equity One, Inc

1696 N.e. Miami Gardens Drive

North Miami Bea, FL 33179

CHANGE OF AGENT

NAME: UNITED INVESTORS PEMBROKE,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 1140

EXAMINER:

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

Pursuant to th	he provisions of sections 607.0502	2, 617.0502, 607.1508, or 617.1508, F	Iorida Statutes,	
this statement	of change is submitted for a corpor	ration organized under the laws of the S	State of	
Florida _	in order to change its reg	istered office or registered agent, or bo	oth, in the State	
of Florida.				
1. The name o	of the corporation: UNITED INVESTOR	RS PEMBROKE, INC.		
2. The principa	al office address: 1696 NE Miami G	ardens Drive		
	North Miami Beac	ch, FL 33179	A CONTRACTOR	
3. The mailing	g address (if different):		The state of the s	
	* -	21, 1997 Document number: P9700	0.5	
	and street address of the current regionartment of State:	istered agent and registered office on fil	e with the	
	Alan J. Marcus			
	20803 Biscayne Blvd., Suite #301			
	Aventura, FL 33180		=	
6. The name changed):	and street address of the new regi	istered agent (if changed) and /or regi	stered office (if	
	Corporation Service Company		-	
	1201 Hays Street (P.O. Box or personal	al mailbox NOT acceptable)	-	
	Tallahassee, FL 32301		_	
The street add agent, as chan	dress of its registered office and the aged will be identical.	e street address of the business office of	of its registered	
Dayso	RD	adopted by its board of directors or by been notified in writing of the change. Laura R. Dunlap, Attorney in Fa (Printed or typed name and title)		
I hereby accept I further agre- performance of registered age	ee to comply with the provisions of of my duties, and I am familiar wil ent. Or. if this document is being 1	gent and agree to act in this capacity. all statutes relative to the proper and the statutes relative to the proper and the statutes relative to the proper and the statutes relative to the proper in the relation has been notified in writing of the statute of th	complete ition as registered	
Jen-	(Signature of Registered Agent))- 5-03 (Date)		
If signing on bel	Jennine F			
	(Typed or Printed Name)	(Canacity)		

Make checks payable to Florida Department of State and Mail to:

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