9000087637



ACCOUNT NO. : 072100000032

REFERENCE : 609109

7149102

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE: March 2, 2000

ORDER TIME : 10:49 AM

ORDER NO. : 609109

800003154428--3

CUSTOMER NO: 7149102

CUSTOMER: Jorge Isaias Diaz, Legal Asst

Centres Inc.

Two Datron Center, Suite 1528 9130 S. Dadeland Boulevard

Miami, FL 33156

CHANGE OF AGENT

NAME: CENTRES CLOVIS GP, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Janine Lazzarini

S. PAYNE MAR 2 2000 CA 1RO Change

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

	provisions of sections 607.0502			Statutes,
_	corporation organized under the wing statement in order to chan			or hoth in
suomiis ine jouo the State of Flori	_	ge iis registered office o	r regisierea agem, o	or oom, m
	the corporation is: Centres	Clovis GP, Inc.		
1. The name of	illo doxportation is:			
2. The mailing a	ddress of the corporation is:	c/o Centres Southwes	t I, L.L.C.,	
100 Co	ngress Avenue, Suite 740	Austin, Texas 787	01	
3. Date of incorp	poration/qualification: Octobe	er 4. 1999 Documen	nt number: <u>P990000</u>	87637
4. The name and	l address of the current registered	agent and office:		
	Arnold D. Shevin		·- 	7 S
-	9130 South Dadeland Box	levard, Suite 1528		吳富
	Miami, Florida 33156			がある
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)				
	Corporation Service Company			TO TO
	1201 Hays Street			ON THE
	Tallahassee, Florida 32301			P
The street addre	ss of its registered office and the	e street address of the bu	usiness office of its	registered
Such change was authorized/by the	s authorized by resolution duly a board.	adopted by its board of o	directors or by an of	ficer so
Signature	of an officer, chairman or vice chairman or	f the board)	(Date)	
		,		
David M. C	Currey President (Printed or typed name and title)	,		
corporation, I he I further agree to	ned as registered agent and to acc reby accept the appointment as re comply with the provisions of all ny duties, and I am familiar with a	egistered agent and agred I statutes relative to the p and accept the obligation	e to act in this capaci croper and complete	ity.
•	rah 10. Skipper	eborah D. Skipper as its agent	3/2/00	
(5	Signature of Registered Agent)		(Date)	 :
If signing on behalf of	f an entity:			
(Typed or Printed Name)		(Capacity)	
* * * FILING FEE: \$35.00 * * *				

CRZEO45(7/97)