Division of Corporations Electronic Filing Cover Sheet

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SECHETARY OF STATE

LLC REGISTERED AGENT CHANGE TRIPLE CROWN PROPERTIES, LLC

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S. HAWKES

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EXAMINER

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1/1/12 1/1/ AJI/(1		0011111111			
Pursuant to the provisions of sections 608,416 or 60 company submits the following statement in order to in the State of Florida.	08.508, chang	Florida Statutes, the una e its registered office or i	lersigned registered	limited liabilit agent, or both	
1. Name of the limited liability company:	TRIPL	E CROWN PROPERTIE	S, LLC	超 10	
2. (a) Principal office address of limited liability company				THE T	
(Note: MUST BE STREET ADDRESS)		Suito 512		400010	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		New York Seven Penn I	NY Plaza	10004	
		Suite 512		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	-	New York	NY	10001	
11/20/2002	_	L02000031	257	. 9	
3. Date of filing/registration in Florida	4.	Document number		-	
5. (a) Registered Agent and Registered Office shows	n on the		•		
Registered Agent:	_	C T Corporation System			
Registered Office Address:		1200 South Pine Island Road			
	_	Plantation	FL	33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or NEW Registered Agent:		Registered Office addre		td., Inc.	
NEW Registered Office Address:	_	515 East Park Avenue			
(MUST BE FLORIDA STREET ADDRESS)					
		Talkahassee FL 32301			
If the limited liability company is not organized under that after the change or changes are made, the Florida's office of the registered agent will be identical. Or, in thereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the article limited liability company. (Signature of a member of authorized representative of a member)	he case ed by a	of a Florida limited liabil n affirmative vote of the	lity compi members	any, it is of the limited	
Dean Ravosa					
(Printed or typed risine of signee)	—–	•			
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my posit F.S. Or, if this document is being filled to merely reflect confirm that the limited liability company has been not (Signature of Registered Agent)	nd agre proper ion as i i a chai ified in	e to get in this capacity, and complete performan registered agent as providing in the registered offici writing of this change.	l further d ice of my led for in e address	igree to dufies, and I Chapter 608, , I hereby	
Walio 4.00 No. at 10					

Division of Corporations, P.O. Box 6327, Tallabassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)