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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
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Certified Copies Certificates of Status	(Business Entity Name)
	(Document Number)
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SECHETARY OF STATE
SECHETARY OF STATE



ION SENTICE COMPANY
ACCOUNT NO. : 07210000032
REFERENCE : 970179 4319480
AUTHORIZATION :
COST LIMIT : \$ 25.00
ORDER DATE : June 27, 2007
ORDER TIME : 9:15 AM
ORDER NO. : 970179-435
CUSTOMER NO: 4319480
CHANGE OF AGENT
NAME: 3111 PROSPECT PLACE EQUITIES LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Doreen Wallace EXT# 2928
EXAMINER:

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: 3111 PROSPECT PLACE EQUITIES LLC
2. The mailing address of the limited liability company is :
c/o Time Equities Inc., 55 Fifth Avenue, NY, NY 10003
12/04/2006 L06000115720
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
National Corporate Research, Ltd., Inc. 100
103 N. Meridian Street
Address
Tallahassee, FL 32301
City, State and Zip
Name 103 N. Meridian Street Address Tallahassee, FL 32301 City, State and Zip 6. The name and address of the new registered agent and/or office:
Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)
Maureen Cullen, Authorized Person
(Printed or typed name of signee)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. (Signature of Registered Agent) Sylvia Queppet, Asst. VP
(Signature of Registered Agend Sylvia Queppet, Asst. VP
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00