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New York, NY

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Albany, NY

April 26, 2001

HLM

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

RE: JACKSONVILLE REGENCY REAL ESTATE ASSOCIATES, LLC

Dear Sir or Madam:

Enclosed herewith please find an one originally executed and two copies of the Certificate of Change of Registered Agent for the above-referenced entity. Also enclosed is my check no. 2004 in the amount of \$25.00 for filing fees. Please return to me a file-stamped copy when completed in the self-addressed stamped envelope I have enclosed.

If you have any questions, please do not hesitate to call.

Sincerely,

Lisa C. Harding Operations Manager

Enclosures

OF APR 30 PM 2: 20
SECRETARY OF STATE

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: JACKSONVILLE REGEN	CY REAL	_ESTATE
ASSOCIATES, LLC 2. The mailing address of the limited liability company is:c/o The Prent	tice-Hal	1
Corporation System, 1013 Centre Rd., Wilmington, DE 19805		·
2/21/01 M0100000039	5	
3. Date of filing/registration in Florida 4. Document no		
5. The name of the registered agent and the registered office address as shown Florida Department of State:	on the rec	ords of the
CT CORPORATION SYSTEM	<u> </u>	
Name 1200 SOUTH PINE ISLAND ROAD		
Address	- =	
PLANTATION FL 33324	-	
City, State and Zip	_	
6. The name and address of the new registered agent and/or office:		2 E E
NATIONAL CORPORATE RESEARCH, LTD.	INC.	APR 30 PM RETARY OF AHASSEE, F
Name		\mathbb{Z}^{∞}
1406 HAYS STREET SUITE 2	— :	
Florida street address (P.O. Box NOT acceptable)		R 30 PM 2 TARY OF STARSSEE, FLO
TALLAHASSEE FL 32301		2: 20 STATE LORID,
City, State and Zip		5m o
If the limited liability company is not organized under the laws of the State of confirmed that after the change or changes are made, the Florida street address and the business office of the registered agent will be identical. Or, in the case liability company, it is hereby confirmed that the change(s) was/were authorize the members of the limited liability company or as otherwise provided in the athe operating agreement of the limited liability company.	of the reg of a Flori ed by an at	gistered office ida limited ffirmative vote of
(Signature of a member or authorized representative of a member)		
YALE I. Paprin	·	14.1 14.1
(Frinted or typed name of signee) I hereby accept the appointment as registered agent and agree to act in this comply with the provisions of all statutes relative to the proper and complete and I am familiar with and accept the obligations of my position as registered Chapter 608, F.S. Or, if this document is being filed to merely reflect a chang address, I hereby confirm that the limited liability company has been notified to the company has been notified	apacity. I performant agent as p e in the re in writing	further agree to ce of my duties, provided for in gistered office of this change.
Division of Corporations, P.O. Box 6327, Tallahassee, Fl	L 32314	

FILING FEE: \$25.00

INHS18(10/99)