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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: USPS MIAMI V, LLC (Name of Limit	ited Liabil	ity Company)			
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office	ce Change	and fee(s) are submitte	ed for filing	g.	
Please return all correspondence concerning this	s matter to	the following:			
Jose Castellanos	10 B L	_			
(Name of Person)					
Charles Baclet and Associates, Inc. (Firm/Company)		_			
2030 Main Street, Suite 1031			TAL	90	
(Address)		_	CRE	HA	
Irvine, CA 92614		_	MASSEE	08 HAR -5	<u></u>
(City/State and Zip Code)			OF STATES. FLORI	00 :1 H	ED
For further information concerning this matter, p	please call	:	TATE ORIDA	00:	
	ı ( <u>949</u>	955-9585	·		
(Name of Person)		(Area Code & Daytime	e Telephon	e Nur	nber)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.C	AILING ADDRESS: gistration Section rision of Corporations D. Box 6327 lahassee, Florida 32314			
Enclosed is a check for the following a	ımount:				
\$25 Filing Fee	\$55 Filing Fee & Certified Copy				

## 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: USPS MIAMI V, LL	C		,		
2. The mailing address of the limited liability	company is : 101 Nor	th Main Street, Suite 1	203			
Greenville, SC 29601						
9/24/2007	M	3000002006				
3. Date of filing/registration in Florida	3. Date of filing/registration in Florida 4. Document number					
5. The name of the registered agent and the re Florida Department of State:	egistered office address	s as shown on the rec	ords of th	ne		
Lexisnexis Docume	nt Solutions, Inc. Name	<u></u>				
1201 Hays Street						
	Address			٠		
Tallahassee, FL 32301			08 HAR			
City, State and Zip  6. The name and address of the new registered agent and/or office:				-177		
6. The name and address of the new registered agent and/or office:			57 1			
NRAI Services, Inc.		S	<u>رن</u> ج			
14,44 00141003, 1110.	Name		<b>유</b>			
2731 Executive Park		r -	<i>က</i> —	$\cup$		
	ress (P.O. Box NOT a	cceptable)	PH I: 00			
Weston	FL 33331					
Cit	y, State and Zip					
If the limited liability company is not organize confirmed that after the change or changes are and the business office of the registered agen liability company, it is hereby confirmed that of the members of the limited liability company or the operating agreement of the limited liability.	e made, the Florida str t will be identical. Or, the change(s) was/we any or as otherwise pro	eet address of the reg in the case of a Flor re authorized by an a	gistered of ida limite ffirmative	ffice d e vote		
(Signature of a member or authorized representative of a m	ember)					
. ,	<b>,</b>					
See Attached (Printed or typed name of signee)						
I hereby accept the appointment as registere comply with the provisions of all statutes related I am familiar with and accept the obligate Chapter 608, F.S. Or, if this document is being address, I hereby confirm that the limited liam NRAI Services, Inc.				gree to luties, for in office ange.		
(Signature of Registered Agent)	Jose Caste	illanos, Asst. Secre	iai y			
Jose Castellanos Division of Corporations	, P.O. Box 6327, Talla	hassee, FL 32314				

**FILING FEE: \$25.00** 

INHS18 (8/05)

Executed on: 2-\$

USPS Miami V, LLC, a Delaware limited liability company

By: Mikki Realty Trust, its Søle Member

By:

Title: Trustee

By:

Title: Trustee

Roger A. Ritvo