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## **COVER LETTER**

Division of Corporations		
SUBJECT: Arnhold and S. Bleich roeder Advisers, LLC (Name of Limited Liability Company)		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Patrick A. Keenan (Name of Person)		
Arnhold and S. Bleichroeder Advisers, LLC (Firm/Company)		
1345 Avenue of the America, 44 mFL (Address)		
New York, NY 10105 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Patrick A. Keenan at (212) 648-3433 (Name of Person) (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Taltahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		
■ \$25 Filing Fee		

INHS18 (5/08)

TO: Registration Section

## 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.

171 1710	Diale of Florida.	
1. Na	ame of the limited liability company: Arnhold	and S. Bleich roeder Advisers, LC
2. (a)	Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	any: 1345 Avenue of the Americas 7444 FEC. New York, NY 10105 AAM: Partick A Keenan
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	same as a bove.
		M 06000005168
3. Da	ate of filing/registration in Florida	4. Document number
5. (a	) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:
	Registered Agent:	Lawrence T. Borsunyi
	Registered Office Address:	11360 North Say Road Suit 101 Palm Beach Gardens, FL 33418
(b)	Enter name of <u>NEW Registered Agent</u> and/or N	<del></del>
	NEW Registered Agent;	C T Corporation System
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road
		Plantation ,FL 33324
that at office hereby liabili limite	fter the change or changes are made, the Florida st of the registered agent will be identical. Or, in the confirmed that the change(s) was/were authorize	ne laws of the State of Florida, it is hereby confirmed reet address of the registered office and the business e case of a Florida limited liability company, it is d by an affirmative vote of the members of the limited s of organization or the operating agreement of the
Pat	rick A. Keenan	
	for typed name of signee)	<del></del>
Rv. Al	1 Corporation Systemark S. Eppley	d agree to act in this capacity. I further agree to proper and complete performance of my auties, and I on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby led in writing of this change.
(Signat	ure of Registered Agent) Assistant Vice-Presiden	
	Division of Corporations, P.O. B FILING FI	

INHS18 (05/08)