Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6380

: CHARLES BACLET AND ASSOCIATES INC Account Name

Account Number: I20080000054 Phone

: (949) 955-9585

Fax Number

: (800) \$62-6504



REGISTERED AGENT CHANGE

NHP TREASURE COAST TIC 10, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

D. BRUCE

NOV 2 4 2008

EXAMINER

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Corporate Filing Menu

Help

	CO	VER LI	1	rer			
TO: Registration Section Division of Corporations		•					
SUBJECT: NHP TREASURE COAST TIC							
(Nam	e of Lin	nited Lis	lbij	ity Company)			
Dear Sir or Madam:							
The enclosed Registered Agent/Registered	l Office	Change	an	d fec(s) are submitted for filing.			
Please return all correspondence concerning	ng this n	natter to	the	e following:			
Nicole Pamell					(0	80	
(Nume of Person)					AG		
					至日	<u>S</u>	FIL
Charles Baclet and Associates, Inc. (Ylm/Company)			_		の記憶	21	-
· · · · · · · · · · · · · · · · · · ·				•	뱱읔	725	[1]
2875 Michelle Drive, Suite 100						خش: ا⊷	****
(Address)			_		362 * 600 mi	川 7.46	
					3500	رب	
Irvine, CA 92606			_				,
(City/State and Zip Code)							
For further information concerning this ma	atter, ple	ease call	:				
Nicole Parnell	at (949)	955-9585			
(Name of Person)		(Area (Cod	le & Daytime Telephone Numb	er)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Reg Div P.C	istr isio . B e	ING ADDRESS: ation Section on of Corporations ox 6327 assee, Florida 32314			
Enclosed is a check for the follow	ving am	ount:					
2 \$25 Filing Fee		\$55 Filing Fee & Certified Copy					

INHS18 (5/08)

TO:850 617 6381

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.

I. Name of the limited liability company: NHP TREASURE	COAST TIC 10, LLC					
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	4885 Riverbend Road, Sulte D Boulder, CO 80301					
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4885 Riverbend Road, Suite D Boulder, CO 80301					
9/25/2007	M07000005767					
3. Date of filing/registration in Florida 4	. Document number					
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State					
Registered Agent:	Corporador Corride Company					
	1201 Hays Street Tallahassee, FL 32301-2525					
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>						
NEW Registered Agent:	NRAI Services, Inc.					
(MUST BE FLORIDA STREET ADDRESS)	2731 Executive Park Drive Suite 4 Weston,FL_33331					
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. November 21, 2008 (Signature of a member or authorized representative of a member)						
Paul J. Hagan (Printed or typed name of signee)						
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the prop am jamiliar with and accept the obligations of my position a F.S. Or, if this document is being filed to merely reflect a ch confirm that the limited liability company has been notified in						
Ose Castellanos, Assistant Secretary (Signature of Registers Agent)						
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314						

FILING FEE: \$25.00