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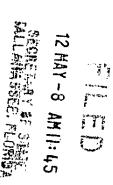
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MAY - 9 2012

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : 191139

91139 739628

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: May 3, 2012

ORDER TIME : 3:53 PM

ORDER NO. : 191139-020

CUSTOMER NO: 7396281

CHANGE OF AGENT

NAME: BRE/COH FL LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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. Name of the limited liability company: BRE/COH FL	LLC	•
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	2 N. Riverside Plaza #211 Chicago IL 60606	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	c/o Ann. M Schneider 2 N. Riverside Plaza #211 Chicago IL 60606	
10/28/2011	M11000005429	
3. Date of filing/registration in Florida	4. Document number	
5 (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
Registered Agent:	NRAI Services, Inc.	: ::::::::::::::::::::::::::::::::::::
Registered Office Address:	515 E. Park Ave. Tallahassee FL 32301	TA I
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	Corporation Service Company 1201 Hays Street	An in to
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the ca hereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	address of the registered office and the busing se of a Florida limited liability company, it is an affirmative vote of the members of the lir	ess nited
Ann M. Schneider, Authorized Person (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 proj am familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a ci confirm that the limited liability company has been notified	ree to act in this capacity. I further agree to per and complete performance of my duties, a strength of the complete performance of my duties, a strength of the complete angle in the registered office address, I hereby in writing of this change.	nd I 608, y
By: (Signature of Registered Agent) Corporation Service Company S	in Writing of this change. Lyuin Quepper ylvia Queppet, Asst. Vice President	^

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00