Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000266932 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : TRIAD PROFESSIONAL SERVICES LLC COA

Account Number : I20080000085 Phone

: (770)777-2091

Fax Number

: (770)220-1943

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

hall@bluerockmi

REGISTERED AGENT CHANGE **BR SUMMIT 2, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Help

JAN -4 2010

https://efile.sunbiz.org/scripts/efilcovr.exe

EXAMINER

12/31/2009 11:0

(((H09000266932 3)))

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.

- ·	
Name of the limited liability company:	BR SUMMIT 2, LLC
2. (a) Principal office address of limited liability compa	any:
(Note: MUST BE STREET ADDRESS)	680 FIFTH AVENUE, 16TH FLOOR NEW YORK, NY 10019
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	16500 NORTH PARK DRIVE, STE 202 SOUTHFIELD MI 48075
03/28/2007	M0700001816
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	on the records of the Florida Dept. of State:
Registered Agent:	CORPORATION SERVICE COMPANY
Registered Office Address:	1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	NRAI Services, Inc. 2731 Executive Park Drive Suite 4 Weston ,FL33331
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability company /s/Deborah Huet Signature of a member or authorized representative of a member Deborah Huet	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative votevierwise provided in the articles of organization on the articles of organization of the articles
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability compa Signature of Registered Agent Jennifor Malik, Assistant Secretary to NRAI	
Utvision of Corporations, P.O. Box 6 (((H09000266932 3))) FILING FEE:	·