(Re	equestor's Name)	
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(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL.
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	•
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Office Use Only



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RECEIVED





ACCOUNT NO. : 12000000195

REFERENCE : 061641

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: January 16, 2012

ORDER TIME : 12:02 PM

ORDER NO. : 061641-087

CUSTOMER NO: 7232314

CHANGE OF AGENT

NAME:

SENTINEL REAL ESTATE

CORPORATION

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 CORPORATIONS

statement of ch	ange is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes inized under the laws of the State of New tered agent, or both, in the State of Florida.	York	
1. The name of	the corporation: SENTINEL PROPE	RTY MANAGEMENT CORP.		
• •	office address:			
1251 Aver	nue of the Americas, 35th Floor, New	w York, NY 10020		
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 12/20/1978	Document number: 842096		
	d street address of the current registered artment of State:	agent and registered office on file with the		
	NRAI Services, Inc.			
	515 E. Park Avenue			
	Tallahassee, FL 32301			
6. The name and (if changed):	d street address of the new registered age	ent (if changed) and /or registered office	12 FEB SECRETI	
	Corporation Service Company	· · · · · · · · · · · · · · · · · · ·	हर्न च	15
	1201 Hays Street			ζ
	(P.O. Box NOT acceptable	2)		
	Tallahassee, FL 32301		(3m) San	
The street addrass changed will	ess of its registered office and the street be identical.	t address of the business office of its regist	tered agent,	
Such change w authorized by the	as authorized by resolution duly adopte he board, or the corporation has been n	ed by its board of directors or by an officer of the change.	rso	
	ure of an officer or director)	Maureen Cathell, Vice President (Printed or typed name and title)		
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent a	nd agree to act in this capacity tutes relative to the proper and complete p ligation of my position as registered agent he registered office address, I hereby confi	performance t. Or, if this irm that the	
By:	ghature of Registered Agent)	01/25/2012 (Date)		
·	chalf of an entity:			
Elizabeth A. I	Dawson, Asst. Vice President		•	

* * * FILING FEE: \$35.00 * * *

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

(Typed or Printed Name)