

A040000001933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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National Registered Agents, Inc.
11600 College Boulevard
Suite 210
Overland Park, KS 66210
800.550.6724
Fax 913.851.0713

September 14, 2011

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Courthouse Park, LLLP

Dear Sir/Madam,

For the purposes of changing the registered office and/or registered agent of the above
Courthouse Park, LLLP.

Please find the enclosed original Certificate of Change of Registered Agent accompanied by
our check in the amount of Amount of \$35.00

Please proceed with the filing of the enclosed, returning official receipts and evidence in the
enclosed envelope.

Thank you in advance for your cooperation in this matter.

Regards,

Wendy D. Rea
National Registered Agents, Inc.

Enclosure - Check

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COURTHOUSE PARK LLLP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A04000001933

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Wendy Rea

Contact Person

NRAI

Firm/Company

1600 College Blvd, Suite 210

Address

Overland Park, KS 66210

City, State and Zip Code

info@nrai.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wendy Rea

Name of Contact Person

at (800)

550-6724

Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. COURTHOUSE PARK LLLP
Name of Limited Partnership or Limited Liability Limited Partnership
2. 12/08/2004 3. A04000001933
Date of filing/registration in Florida Florida document number

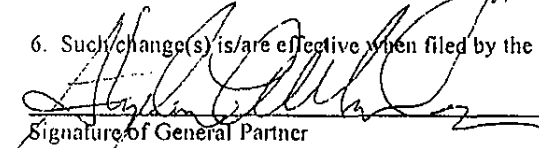
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CFRA, LLC
Name
100 S. ASHLEY DR. SUITE 400
Address
TAMPA FL 33602
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

NRAI Services, Inc.
Name
515 East Park Avenue
Florida street address (P.O. Box not acceptable)
Tallahassee FL 32301
City, State and Zip

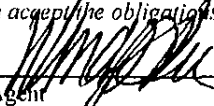
6. Such change(s) is/are effective when filed by the Florida Department of State.


Signature of General Partner

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.

NRAI Services, Inc.

by:


Signature of Registered Agent

Wendy D Rea, Assistant Secretary

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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