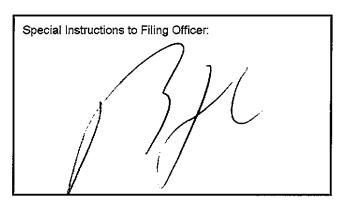
## 1304000000469

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						



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	ACCOUNT NO.	:	072100000032	-		
	REFERENCE	:	811365 7	458513		
	AUTHORIZATION	:	Spullike	458,5Ī3 MAN		
	COST LIMIT	:	\$ 35.00			
ORDER DATE :	January 13, 2006	<b>-</b>		FL	2006 JAN 18 F	
ORDER TIME :	9:53 AM			1	50000000000000000000000000000000000000	7
ORDER NO. :	811365-440				SEG PA	O
CUSTOMER NO:	7458513				FST 2	مب
		- <b>-</b> -		<del>-</del> -	عَمِينَ اللَّهِ	
	CHANGE OF A	GEN	<u>T</u>			
NAME:	DIGITAL REALT	Y.I	RUST, L.P.	TALLATING	2006 JAN 18 SECRETARY	FILE
CERTI	THE FOLLOWING AS	PR	OOF OF FILING	):	PH 2: 04 SEEF STATEA	Ö

EXAMINER'S INITIALS:

CONTACT PERSON: Heather Chapman

## 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. DIGITAL REALT	Y TRUST, L.P.					
Nar	ne of Limited Partnership or L	imited Liability Limited Partnership	)			
2. October 27, 2004		3_B04000000469				
Date of filing/registration in Florida		Florida documen	t number			
4. The name of the reg Department of State:	gistered agent and the registere	d office address as shown on the rec				
	NRAI Services, Inc.		7200			
	N	ame				
	2731 Executive Park Drive, S	uite 4	验主			
	Ad	dress	S A CO			
	Weston, FL 33331		平平 圣			
	City, Sta	te and Zip	F. 52 23			
NRAI Services, Inc.  Name  2731 Executive Park Drive, Suite 4  Address  Weston, FL 33331  City, State and Zip  5. The name and Florida street address of the new registered agent and/or office:						
	Corporation Service Company	<u> </u>				
	N	ame	·· <del>···</del>			
	1201 Hays Street					
•	Florida street address (	P.O. Box not acceptable)				
	Tallahassee	FL 32301				
•	City, Sta	te and Zip	•			
6. Such change(s) is/a	re effective when filed by the I	Florida Department of State.				
Maureen Cullen, Attorne	ey in Fact on behalf of Digital Re	alty Trust, Inc., General Partner				
I hereby accept the app	pointment as registered agent a tions of all statutes relative to t	ind agree to act in this capacity. I fi he proper and complete performanc	urther agree to			
	an accept the obligations of monpany		e of my vailes,			
	d AgenElizabeth A. Dawson, A	sst. Vice President	,			
Filing Fee:	\$35.00					
Certified Copy (o)	ptional): \$52.50					