

D98000000025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

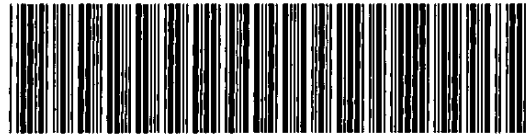
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAY 22 PM 3:41

RA Change

05/31/06

DL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ACREM II BUSINESS TRUST
(Name of Corporation)

DOCUMENT NUMBER: D98000000025

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

Please return all correspondence concerning this matter to the following:

Isabel Burgos on behalf of Incorp Services, Inc.
(Name of Contact Person)

INCORP SERVICES, INC.
(Firm/Company)

3155 East Patrick Lane, Suite 1
(Address)

Las Vegas, NV 89120-3481
(City/State and Zip Code)

For further information concerning this matter, please call:

Isabel Burgos / Incorp Services, Inc. at (702) 866-2500
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR DECLARATION OF TRUST

Pursuant to the provisions of section 609, Florida Statutes, this statement of change is submitted
for a Declaration of Trust organized under the laws of the State of Delaware in order to change its
registered office or registered agent, or both, in the State of Florida.

- declaration*
1. The name of the *of trust*: ACREM II BUSINESS TRUST
2. The principal office address: WILMINGTON TRUST COMPANY
1100 N MARKET ST WILMINGTON DE 19890
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/29/1988 Document number: D98000000025
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

CORPORATION SERVICE COMPANY

1201 HAYS ST

TALLAHASSEE FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

INCORP SERVICES, INC.

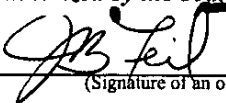
18450 NE 2nd Ave.

(P.O. Box NOT acceptable)

Miami, FL 33179

The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
Authorized by the board, or the declaration of trust has been notified in writing of the change.



(Signature of an officer or director)

Joseph B. Fell

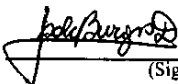
Assistant Vice President

*of Wilmington Trust Company,
as Trustee*

(Printed or typed name and title)

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 and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a
change in the registered office address, I hereby confirm that the declaration of trust has been notified in writing of this change.



on behalf of Incorp Services, Inc. April 12, 2006

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

Isabel Burgos on behalf of Incorp Services, Inc.

(Typed or Printed Name)

*** 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)

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