

Division of Corporations

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F02000002959

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 205-0380

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC

Account Number : 120620000096

Phone : (770) 777-2091

Fax Number : (770) 220-1943

REGISTERED AGENT CHANGE

COLE BOULEVARD SQUARE MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

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RECEIVED
05 DEC 21 AM 8:00
FLORENCE COURT REPORTINGRA change
T. Davis05 DEC 21 AM 9:47
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(((H05000290131 3)))

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Arizona in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Cole Boulevard Square Management, Inc.
2. The principal office address: 2555 E. Camelback Road, Suite 400, Phoenix, AZ 85016
3. The mailing address (if different): _____
4. Date of incorporation/qualification: June 11, 2002 Document number: FG2000002959
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Q T Corporation System1200 South Pine Island RoadPlantation, FL 33824

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

NRAI Services, Inc.8731 Executive Park Drive, Suite 4(P.O. Box or personal mailbox NOT acceptable)Weston, FL 33331

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 corporation has been notified in writing of the change.

(Signature of an officer or director)

Blair D. Koblenz, Vice President
(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 corporation has been notified in writing of this change.

NRAI Services, Inc.by: Mary Paris

(Signature of Registered Agent)

12-21-05

(Date)

If signing on behalf of an entity:

Mary Paris
(Typed or Printed Name)

Asst. Secy
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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