F05000007367

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TO ACKNOWLEDGE

DEPARTMENT OF STATE DIVISION OF CORPORATION

RA. Chg. C.COULLIETTE

DEC 01 2011

EXAMINER





ACCOUNT NO. : 12000000195

REFERENCE : 981294 7191210

AUTHORIZATION :[

COST LIMIT

ORDER DATE: November 15, 2011

ORDER TIME : 4:30 PM

ORDER NO. : 981294-021

CUSTOMER NO: 7191210

CHANGE OF AGENT

NAME: BRE/LQ OPERATING LESSEE INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

statement of cha		607.1508, or 617.1508, Florida Statutes, this ed under the laws of the State of Delaware and agent, or both, in the State of Florida.	
1. The name of	the corporation: BRE/LQ OPERATING	LESSEE INC.	 -
• •	office address: n Ridge, Ste. 600, Irving, TX 75038		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 12/20/2005	Document number: F05000007367	
	d street address of the current registered ager rtment of State:	nt and registered office on file with the	
	NRAl Services, Inc.		
	515 E. Park Avenue		(教) ~~~
	Tallahassee, FL 32301		STATE OF C
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	图 DEC -1 AM 11:30
	Corporation Service Company		=
	1201 Hays Street		∵
	(P.O. Box NOT acceptable)		0
	Tallahassee, FL 32301		
The street address changed will	ess of its registered office and the street ad be identical.	dress of the business office of its registered ag	zent,
Such change was authorized by the	as authorized by resolution duly adopted be board, or the corporation has been notif	y its board of directors or by an officer so jed in writing of the change.	
(Algnati	ute of an officer or director)	Maurcen Cathell, Vice President (Printed or typed name and title)	
I further agrée of my duties, an document is bei corporation has	s been notified in writing of this change.	ngree to act in this capacity. es relative to the proper and complete perform ation of my position as registered agent. Or, i registered office address, I hereby confirm tha	ance f this t the
Ву:	on Service Company	11/15/2011	
(Si	gnature of Registered Agent)	(Date)	
If signing on be	chalf of an entity;		
	Dawson, Asst. Vice President		
(.	Typed or Printed Name)		

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