Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110002441693)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : NRAI CORPORATE SERVICES, INC. - IR

Account Number: I20080000054 : (949)955-9585

**Enter the email address for this business entity to be used for facure annual report mailings. Enter only one email address please in

Email Address:

REGISTERED AGENT CHANGE NNN REALTY ADVISORS, INC.

Certificate of Status Certified Copy 0 Page Count 03 Estimated Charge \$35.00

10/7/2011 1:43 PM

COVER LETTER

TO:	Amendment Section Division of Corporation	ns							
SUBJ	ECT:	NNN Realty Ac	dvisors, Corporatio	Inc.					
DOCUMENT NUMBER:		F0700006023							
The er	nclosed Statement of Cha	nge of Registered Offi	ce/Agent a	nd fee are submi	tted for filing.				
Please	return all correspondence	e concerning this matte	er to the fo	llowing:					
	•	<u> </u>		·					
Dang Nguyen									
Dang Nguyen Name of Contact Person									
		NRAI Corpora	te Servic	es, Inc.					
		rinive	.ompany						
		2075 Mahalla	Debra Si	# 100					
		2875 Michelle Ad	dress	lite 100					
		Invine (CA 92606	3					
Irvine, CA 92606 City/State and Zip Code									
E-mail address: (to be used for future annual report notification)									
For further information concerning this matter, please call:									
	Dang Ng	uyen	at (800	562-6439 ime Telephone Number				
	Name of Contac	ct Person	· Aı	ea Code & Dayt	ime Telephone Number				
Enclo	sed is a \$35.00 check ma	de payable to the Depa	rtment of	State.					
	<u>Mailin</u>	g Address: dment Section		Street Address Amendment S	i				
		dment Section on of Corporations		Amendment S Division of Co					
		Sox 6327		Clifton Buildi					
		nassee, FL 32314			ve Center Circle				

Tallahassee, FL 32301

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

Pursuant to the provisions of sections 6 statement of change is submitted for a cin order to change its registere	orporation organized under	the laws of the State of Dela	ware							
1. The name of the corporation: NNN	Realty Advisors, Inc	c								
2. The principal office address: 1551 N. Tustin Ave., Suite 200, Santa Ana, CA 92705										
3. The mailing address (if different):										
4. Date of incorporation/qualification: _	12/10/2007 Docu	ment number: F070	000060	23						
5. The name and street address of the cu Florida Department of State: (If resign		gistered office on file with the	;							
Corporation Servi	ce Company		249							
1201 Hays Street			一个	30	===					
Tailahassee, FL 3	2301		AHA:SA		entire grafin					
6. The name and street address of the ne (if changed):	w registered agent (if change	ed) and /or registered office	Y OF S	Sh: II W						
NRAI Services, In	C		35	Ξ	7					
515 East Park Ave) .		20 6 A	יט						
	P.O. Box NOT acceptable									
Tallahassee, FL 3	2301									
The street address of its registered offi as changed will be identical.	ce and the street address of	the business office of its reg	istered a	gent,						
Such change was authorized by resolu authorized by the board, or the corpora	tion duly adopted by its boa tion has been notified in w	ard of directors or by an offici riting of the change.	er so							
Signature of an officer or director	<u>۱۸۹۲ / ۱۸۹۲</u>	licole Parnell, Vice Pres	ident	·						
I hereby accept the appointment as rey I further agree to comply with the prov of my duties, and I am familiar with a document is being filed merely to refle corporation has been notified in writt	By Pownistered agent and agree to visions of all statutes relatived accept the obligation of act a change in the registered of this change.	er of Attomey for Todd Mikle act in this capacity. The proper and complete my position as registered ago d office address, I hereby co	s, Preside perform int. Or, i nfirm tha	lent nance if this it the						
Acc	>>	10/1/11								
Signature of Registered Agent		Date								
If signing on behalf of an entity:										
Jose Castellanos Typod 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)