

## 09000002855

Office Use Only



300207500033

P.A. Charge

JUN 27 2011

**EXAMINER** 



ACCOUNT NO. : I2000000195

REFERENCE : 817518 7389226

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: June 18, 2011

ORDER TIME : 10:35 AM

ORDER NO. : 817518-066

CUSTOMER NO: 7389226

## CHANGE OF AGENT

NAME: GRUBB & ELLIS SECURITIES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS:

## \*\*STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	unge is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statutes, thicked and a statutes, the light state of Californ ered agent, or both, in the State of Florida.		<del>_</del>
1. The name of	the corporation: GRUBB & ELLIS SE	ECURITIES, INC.		
1551 N. Tu	ustin Ave., Suite 200, Santa Ana, CA	. 92705		<del></del>
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 07/16/2009	Document number: F09000002855		
	d street address of the current registered a rtrnent of State:	gent and registered office on file with the		
	NRAI Services, Inc.			
	515 East Park Avenue		==	<u>新</u> 尼
	Tallahassee, FL 32301		JUN 24	92 92 93 93
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			79	RY OF S
	Corporation Service Company		3: 28	RAHL
	1201 Hays Street			r est
	(P.O. Box NOT acceptable)			
	Tallahassee, FL 32301	*		
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its register	ed age	nt,
Such change was authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been no	l by its board of directors or by an officer so tified in writing of the change.	)	
	ire of an officer or director)	Maureen Cathell, Vice President (Printed or typed name and title)		_
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent an to comply with the provisions of all stati		forma. Or, if i 1 that i	nce his the
By:	a do	06/17/2011		
	manure of Registered Agent)	(Date)		
	half of an entity:			
	Dawson, Asst. Vice President Typed or Printed Name)			

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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