# Florida Department of State
## Division of Corporations
### Electronic Filing Cover Sheet

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To:
    Division of Corporations
    Fax Number     : (850)617-6380

From:
    Account Name    : NRAI CORPORATE SERVICES,INC.-IRVINE
    Account Number : I20080000054
    Phone         : (949)955-9585
    Fax Number     : (800)562-6504

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

**Email Address:**_____

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## REGISTERED AGENT CHANGE
## DAYMARK REALTY ADVISORS, INC.

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

# COVER LETTER

**TO:**   Amendment Section
         Division of Corporations

**SUBJECT:**_____ Daymark Realty Advisors, Inc._____
                              Name of Corporation

**DOCUMENT NUMBER:**_____ F11000000829_____

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:

_____ Dang Nguyen_____
                       Name of Contact Person

_____ NRAI Corporate Services, Inc._____
                       Firm/Company

_____ 2875 Michelle Drive, Suite 100_____
                          Address

_____ 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 Nguyen_____  at ( __800__ )  ___562-6439___
      Name of Contact Person          Area Code & Daytime Telephone Number

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

| **Mailing Address:** | **Street Address:** |
|---|---|
| Amendment Section | Amendment Section |
| Division of Corporations | Division of Corporations |
| P.O. Box 6327 | Clifton Building |
| Tallahassee, FL 32314 | 2661 Executive Center Circle |
|  | Tallahassee, FL 32301 |

CR2E045 (8/05)

## 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* Delaware
*_____ in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Daymark Realty Advisors, Inc.

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: ___2/23/2011___ Document number: ___F11000000829___

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

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

NRAI Services, Inc.

515 East Park Ave.
P.O. Box NOT acceptable

Tallahassee, FL 32301

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

Nicole Parnell, Vice President by
Power of Attorney for Todd Mikies, 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.*

_____
Signature of Registered Agent

____10/6/11____
Date

If signing on behalf of an entity:

__Jose Castellanos, Assistant Secretary__
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)

FILED
11 OCT -7 AM 11:50
SECRETARY OF STATE
DIVISION OF CORPORATIONS