## F980000003045

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
| ·                                       |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| •                                       |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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2009 MAY 28 PM 3: 1
SECRETARY OF STATE

5/28/09



CORPORATION SERVICE COMPANY. ACCOUNT NO. : I2000000195

REFERENCE: 999615 7288091

AUTHORIZATION :

COST LIMIT :

ORDER DATE: May 19, 2009

ORDER TIME : 11:19 AM

ORDER NO. : 999615-178

CUSTOMER NO: 7288091

## CHANGE OF AGENT

NAME: TEACHERS BOCA PROPERTIES II,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Heather Chapman

EXAMINER'S INITIALS:

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

| statement of cha   | provisions of sections 607.0502, 617.0502<br>ange is submitted for a corporation organizer to change its registered office or register  | zed under the laws of the                            | State of Dela         | aware_                               |                     |
|--|---|--|-----------------------|--------------------------------------|---------------------|
| 1. The name of   | the corporation: TEACHERS BOCA  | A PROPERTIES II                                      | , INC.                |                                      |                     |
| • •  | office address:d Avenue, 8th Floor, New York,   | NY 10017   |                       |                                      |                     |
|  | address (if different):   |  |                       | <u> </u>                             | <u> </u>            |
| 4. Date of incor   | poration/qualification: 05/29/1998  | Document number:                                     | F98000003             | 3045                                 |                     |
|  | d street address of the current registered ag rtment of State:  | ent and registered office                            | on file with the      |                                      |                     |
|  | C T Corporation System  |  |                       |                                      |                     |
|  | 1200 South Pine Island Road   |  | -                     |                                      |                     |
|  | Plantation, FL 33324  |  |                       |                                      | - '                 |
| 6. The name and (if changed):  | d street address of the new registered agent  | (if changed) and /or regi                            | istered office        | 2009 NAY 28                          | FE                  |
|  | Corporation Service Company   |  | SSES                  | <                                    | m                   |
|  | 1201 Hays Street  |  |                       |                                      | D                   |
|  |   |  | OR:                   | 74 <del></del>                       |                     |
| · 11   | Tallahassee, FL 32301   |  |                       |                                      | 4                   |
| as changed will  | ess of its registered office and the street a let be identical.   | idaress of the business o                            | office of its regi    | siereu ag                            | ent,                |
| Such change w authorized by t  | as authorized by resolution duly adopted<br>he board, or the corporation has been not   | by its board of directors ified in writing of the ch | s or by an officange. | er so                                |                     |
|  | ure of an officer or director)  | Maureen Cullen,                                      | Attorney in           | Fact                                 | _                   |
| I hereby accept<br>I further agree<br>of my duties, at<br>document is be<br>corporation ha | t the appointment as registered agent and to comply with the provisions of all statu and I am familiar with and accept the obliging filed merely to reflect a change in the seen notified in writing of this change. tion Service Company | I assess to set in this can                          | aaitu                 | performe<br>nt. Or, if<br>ifirm that | ance<br>this<br>the |
|  | gnature of Registered Agent)  | (Da  | ate)                  |                                      | _                   |
| If signing on be   | chalf 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 \* \* \*