1,00000011138

D:1		
Bricker & Eckler ATTORNEYS AT LAW		
BRICKER & ECKLER LLP 100 South Third Street Columbus Ohio 43215 - 4291		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified CopiesCertificates of Status		
Special Instructions to Filing Officer:		
12/15 PLA change		
L-16138		

Office Use Only



600043385176



12/15/04--01036--001 **540.00

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is:	North Village Office Associates, LLC
2. The mailing address of the limited liability co	
Columbus, Ohio 43215	
12/27/2000	L0000016138
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the regist Florida Department of State: Kriner, Deborah L.	tered office address as shown on the records of the
5500 Village Blvd.,	Name Ste. 200
West Palm Beach,	State and 7in
6. The name and address of the new registered ag	See on the
Deborah L. Kriner	gent and/or office:
1201 US Highway	Name One, Suite 350A
Florida street address	s (P.O. Box NOT acceptable)
North Palm Beach	FL 33408
City, S	tate and Zip
and the business office of the registered agent wi	ade, the Florida street address of the registered office ll be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote of as otherwise provided in the articles of organization or
(Signature of a member or authorized representative of a membe	
James A. Rutledge, Authorized Representa	
(Printed or typed name of signee)	THE CONTRACTOR OF THE CONTRACT
I hereby accept the appointment as registered as comply with the provisions of all statutes relative and I am familiar with and accept the obligation. Chapter 608, F.S. Or in this document is being faddress, I hereby confirm that the limited liability (Signature of Registered rigent)	gent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, s of my position as registered agent as provided for in filed to merely reflect a change in the registered office y company has been notified in writing of this change.
\smile γ	O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

5