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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: BARTOW PLAZA LLC Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Name of Person			
AMERICAN CONHERCIAL REALTY CORP Firm/Company			
324 DATURA STREET SUITE 102			
WEST PALT GENCH, FL 33401 City/State and Zip Code			
BAERO AN COM REALTY, COM E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Rick BAER at (561) 775-1300			
Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
\$25 Filing Fee \$25 Filing Fee & Certified Copy			

INHS18 (5/08)

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 limit liability company submits the following statement in order to change its registered office or register agent, or both, in the State of Florida.

3			
1. Name of the limited liability company: BACTOC	N PCAZA LLC		
2. (a) Principal office address of limited liability company	" GJ REALTY / BARTOC		
(Note: MUST BE STREET ADDRESS)	16 EAST 34th ST 16th Flo New YORK NY 10016		
(b) Mailing address of limited liability company:	67 REALTY / BARTOW		
(Note: MAY BE POST OFFICE BOX)	NEW YORK, NY 10016		
3. Date of filing/registration in Florida	1. Document number		
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:		
Registered Agent:	AMERICAN COMMERCIAL REAL		
Registered Office Address:	324 DATURA STREET		
	WEST PALM BEACH, FL. 3		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent:			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	aws of the State of Florida, it is hereby		
(MCSI BE I LORIDA SIRELI ADDRESS)	,FL 3 =		
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization		
(A = 1 a = 1			
Printed or typed name of signee	-		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to men address. I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties sition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.		
Signature. of Registered Agent			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)

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