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SECRETARY OF STATE
AND ASSEFT FLORID

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.

agent, or both, in the State	e of Florida. ¯	9	•		
1. The name of the limite	d liability company is:	TME Multi-Family III, LLC	· ·		•
		mpany is : TME Multi-Fami		.C c/o Gusta	avus_
		x 13667, Research Triangl			
06/22/2004 L04000046688					
Date of filing/registration in Florida 4. Document number					
5. The name of the registe Florida Department of S		ered office address as shown	on the re	ecords of the	-
	12628 Arley Drive	Name	-		~ 9 ⋅ +
	Orlando, FL 34786	Address State and Zip	· 本 -	05 TALL	
6. The name and address of	of the new registered ag	ent and/or office:		05 JUN 27 SECRETAR ALLAHASS	
	Corporation Compa	ny of Orlando		27 ARY ASSE	
	300 S. Orange Aven	Name Avenue, Suite 1000 (MRH)		AM 8: UFST/	
	Florida street address				
	Orlando	_{FL} 32801		>	
	City, St	ate and Zip		•	
confirmed that after the chand the business office of liability company, it is her	nange or changes are ma the registered agent will be confirmed that the of d liability company or as	nder the laws of the State of lade, the Florida street address labe identical. Or, in the case change(s) was/were authorizes otherwise provided in the ampany.	of the re of a Flor d by an a	egistered offic orida limited affirmative v	ote of

(Signature of a member or authorized representative of a member)

Gustavus Bass, Manager

(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

Corporation Company of Orlando

By: J. Gregory Humphries, Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00