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TIMMIS & INMAN PLLC

Attorneys and Counselors at Law

Robert E. Graziani George A. Peck Henry J. Brennan, III Mark W. Peyser Richard M. Miettinen Bradley J. Knickerbocker Michael F. Wais John C. Louisell Robert R. Cleary Joseph M. Xuereb

300 Talon Centre Detroit, Michigan 48207

Telephone: (313) 396-4200 Facsimile: (313) 396-4228 (313) 396-4229 www.timmis-inman.com Anthony J. Long Bradley F. Scobel Michael J. Sheehan Robert J. Curtis

John M. Pollock

Michael T. Timmis Wayne C. Inman William B. Fitzgerald David E. Costa David A. Sebastian Of Counsel

August 10, 2005

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

RE: Naples BD II LLC, LO5000041969

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Dear Sir or Madam:

Enclosed are an original and one copy of a Statement of Change for Naples BD II LLC, along with a check in the amount of \$25.00 to cover the cost of filing.

Please stamp a copy with the date of filing and return to this office in the envelope provided. Thank you for your assistance in this matter.

Very truly yours,

Linda M. Bierl, Paralegal

TIMMIS & INMANPLLC

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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: Naples BD II LLC 2. The mailing address of the limited liability company is: 350 Talon Centre, Detroit, MI 48207 L05000041969 04/28/2005 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: CT Corporation System Name 1200 S. Pine Island Road Address Plantation, FL 33324 City, State and Zip 6. The name and address of the new registered agent and/or office: Michael T.O. Timmis Name 2950 Fort Charles Florida street address (P.O. Box NOT acceptable) Naples If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) Michael T. Timmis, as Trustee u/t/a/d 2/26/85 (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.

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

FILING FEE: \$25.00

Signature of Registered Agent

INHS18(10/99)

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

Michael T. Timmis, as Trustee u/t/a/d 2/26/85

(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

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

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