L05000123713

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ACCOUNT NO. : 072100000032 REFERENCE ____ AUTHORIZATION ! COST LIMIT : \$ 25.00

ORDER DATE: February 6, 2006

ORDER TIME : 9:12 AM

ORDER NO. : 854205-010

CUSTOMER NO: 5034554

CHANGE OF AGENT

NAME: ONE BISCAYNE TOWER, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER:

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 limite	d liability company	is: ONE BISCA	YNE TOWER, LLC		
2. The mailing address of	the limited liability	company is:_	c/o L&B Realty Advi	sors, LLP	
8750 North Central Expresswa	uy, Suite 800, Dallas, TX	(7532)			
December 30, 2005		-	L05000123713		
3. Date of filing/registrati	on in Florida	•	4. Document nun	nber	
5. The name of the register Florida Department of S	red agent and the reg	gistered office	address as shown o	on the records of the	
	Dean Bunch c/o S	Sutherland Ashill &	& Brennan LLP		
		Name		•	
	3600 Maclay	Boulevard, South	, Suite 202		
		Address		7. 72	
Tallahassee, FL 32312-1267					
	Cit	y, State and Zij	•	三部 二	
6. The name and address o	f the new registered	agent and/or o	ffice:	TILL AKII: 08 2006 FEB 16 AKII: 08 SECRETARY OF STATE TALL AHASSEE, FLORID	
Corporation Service Company					
Name To =					
1201 Hays Street					
	Florida street addre	ss (P.O. Box N	IOT acceptable)	7	
_	Tallahassee,	FL	3,2301		
	City,	State and Zip			
If the limited liability components of the character of the business office of the liability company, it is here of the members of the limit or the operating agreement	ange or changes are the registered agent which the confirmed that the ted liability compan of the limited liability.	made, the Flori will be identica ne change(s) way y or as otherwi ity company.	ida street address o l. Or, in the case o as/were authorized	of the registered office of a Florida limited I by an affirmative vote	
(Signature of a member or authorize	ed representative of a mem	ber)			
(Printed or typed name of signee)	15 SniTU				
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if this address, I hereby confirm the	tment as registered (of all statules relativ accept the obligation s document is being tat the limited liabili	agent and agre ve to the proper ns of my position filed to merely ity company ha	e to act in this cap r and complete per on as registered ag r reflect a change i is been notified in	acity. I further agree to formance of my duties, gent as provided for in the registered office writing of this change.	
_ Michelle	K. Varm	ON.	-	,	
(Signature of Registered Agent) Mi	chelle R. Vannoy, Asst.	Vice President			

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