Division of Corporations Public Access System

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MF NORTH BAY ROAD, LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR 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. Name of the limited liability company: MF NORTH BAY ROAD, LLC 2. (a) Principal office address of limited liability company: 390 PARK AVENUE, 3RD FLOOR (Note: MUST BE STREET ADDRESS) % KFR HOLDING, LLC NEW YORK NY 10022 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 3/10/2006 106000026264 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: DADY ROBERT E Registered Agent: SUITE 601 Registered Office Address: 201 ALHAMBRA CIRCLE, CORAL GABLES/FL/33134 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW Registered Agent:** CT Corporation System 1200 South Pine Island Road NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Plantation FL33324 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) Florence Merceron (Printed or typed name of signed) 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. CT Corporation System (Signiture of Registered Agent

P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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