L08000042658

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL
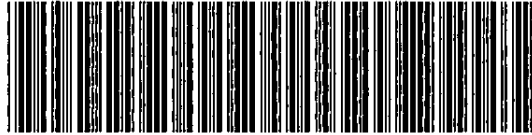
(Business Entity Name)

(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

RA Change ✓
L08-42658

N. CAUSSEAUX
DEC 3 0 2008
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: <u>Independence Realty - Tampa Office/Flex, LLC</u>   ▣
<div align="center">(Name of Limited Liability Company)</div>

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:

Steven W. Bienstock, Esq.
<div align="center">(Name of Person)</div>

Beus Gilbert, PLLC
<div align="center">(Firm/Company)</div>

4800 North Scottsdale Rd., Ste. 6000
<div align="center">(Address)</div>

Scottsdale, Arizona 85251
<div align="center">(City/State and Zip Code)</div>

For further information concerning this matter, please call:

Steven W. Bienstock   at (480) 429-3034
<div align="center">(Name of Person)   (Area Code & Daytime Telephone Number)</div>

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   ☐ $55 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 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: __Independence Realty - Tampa Office/Flex, LLC__

2. (a) Principal office address of limited liability company: __5 Independence Way__
      (*Note: MUST BE STREET ADDRESS*) __Suite 300__
      __Princeton, NJ 08540__

   (b) Mailing address of limited liability company: __5 Independence Way__
      (*Note: MAY BE POST OFFICE BOX*) __Suite 300__
      __Princeton, NJ 08540__

__April 29, 2008__   __L08000042658__

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:

   Registered Agent: __Jerome N. Block__

   Registered Office Address: __106 Bianca Drive__
                                              __Palm Beach Gardens, FL 33418__

   (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)   __130 Via Mariposa__
                                              __Palm Beach Gardens____,FL 33418__

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)

_____
(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
FILING FEE: $25.00

INHS18 (05/08)