

LO9000003295

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : NRAI SERVICES, LLC
Account Number : I20080000104
Phone : (302)674-4089
Fax Number : (302)674-5266

2009 MAR -5 AM 8:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

1200 N. OCEAN BOULEVARD, LLC

Certificate of Status	0
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MAR - 6 2009

EXAMINER

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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. Name of the limited liability company: 1200 N. OCEAN BOULEVARD, LLC
2. (a) Principal office address of limited liability company: 5960 N. BROADWAY CHICAGO, IL 60660 US
(b) Mailing address of limited liability company: 5960 N. BROADWAY CHICAGO IL 60660 US

01/12/2009
3. Date of filing/registration in Florida

L09000003295
4. Document number

- 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: MIAMI CENTER REGISTERED AGENTS, LLC
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NRAI SERVICES, INC.

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)

DEMETRIS GIANNIOLIAS
(Printed or typed name of signer)

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

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