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Division of Corporation Page 1 of 1 **Division of Corporations**

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To:

Division of Corporations

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: (850) 617-6380

From:

: NRAI SERVICES, LLC Account Name

Account Number : I20080000104

: (302)674~4089

Fax Number

: (302)674-5266

REGISTERED AGENT CHANGE

1208 N. OCEAN BOULEVARD, LLC

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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. Matthe of the finited flathing company: 1200 N. O	CEAN BOULEVARD, LLC	😈
 (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS) 	ny: 5960 N. BROADWAY CHICAGO, II, 60660 US	
(b) Malling address of limited liability company: (Note: MAX BE POST OFFICE BOX)	5960 N. BROADWAY CHICAGO IL 60860 US	B
01/12/2009 3. Date of filing/registration in Florida	1. Document number	8
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of Stat	ie:
Registered Agent:	MIAMI CENTER REGISTERED AGENT	s.u.c.
Registered Office Address:	201.8. BISCAYNE BOULEVARD SUITE 1700 MIAMLEL 33131 US	P
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:	
NEW Registered Agent:	NRAI SERVICES, INC.	
NEW Registered Office Address: (MUST RE FLORIDA STREET ADDRESS)	2781 EXECUTIVE PARK DRIVE	
	WESTON p.FL 333	31
If the limited liability company is not organized under the that after the change or changes are made, the Florida structure of the registered agent will be identical. Or, in the negety confirmed that the change(s) was/were authorized lability company or as otherwise provided in the articles isnited liability company.	case of a Florida limited liability compa by an affirmative vote of the members (ny, it is of the limited ent of the
Signature of a barraber of a literized representative of a member)		MAR

d or typed name of signes)

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 statutes with and accept the obligations of my position as registered agent as provided for in Chapter 608; F.S. Or, it this document is being filled 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 FER: \$25.00**

INHS18 (05/08)