L09000031006

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ACCOUNT NO. : 12000000195

REFERENCE : 137954 7576545

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ORDER DATE: March 21, 2012

ORDER TIME : 9:29 AM

ORDER NO. : 137954-015

CUSTOMER NO: 7576545

CHANGE OF AGENT

NAME:

LBUBS 2007-C2 NORTH SEMORAN

BOULEVARD, LLC

PLEASE	RETURN	THE	FOLLOWING	AS	PROOF	OF	FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

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. Nan	ne of the limited liability company: LBUBS 2007-C2	NORTH SEMORAN BOULEVARD, LLC	
, ,	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	c/o LNR Partners Inc. 1601 Washington Avenue, Ste 700 Miami, FL 33139	
3/30/20	09	L09000031006	
3. Date	e of filing/registration in Florida	4. Document number	
` ,	Registered Agent and Registered Office shown on the Registered Agent: Registered Office Address:	cr corporation System 200 South Pine Island Road Plantation, FL 33324	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> <u>NEW</u> Registered Agent:	Registered Office address: Corporation Service Company	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
that after of fice of hereby liability limited /s/ Elizal (Signature Elizabeth (Printed of the first of the f	mited liability company is not organized under the last the change or changes are made, the Florida street of the registered agent will be identical. Or, in the case confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company. Deth P. Danne, Authorized Representative of a member or authorized representative of a member or authorized Person or typed name of signce) The P. Danne, Authorized Person or typed name of signce of all statutes relative to the property accept the appointment as registered agent and against the provisions of all statutes relative to the profiliar with and accept the obligations of my position of that the limited liability company has been notified	aws of the State of Florida, it is hereby considered and the lead of a Florida limited liability company an affirmative vote of the members of organization or the operating agreement	DECKETARY OF STATE OF STATE OF CORPORATION OF CORPORATION OF CORPORATION OF CORPORATION OF 35
	of Registered Agent) Corporation Service Company ace E. Kirby, Assistant Vice President		

FILING FEE: \$25.00