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DIVISION OF CORPORATIONS

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CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE : TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT: KATIE WONSCH** DATE: 11/10/2011 **REF. #:** 000427.157085 CORP. NAME: **NOBLE NET LEASE IIIH, LLC** () ARTICLES OF INCORPORATION (XX) ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () TRADEMARK/SERVICE MARK () FICTITIOUS NAME () ANNUAL REPORT () FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () MERGER () WITHDRAWAL () REINSTATEMENT () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 542196 FOR \$ 25.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$___

() CERTIFICATE OF GOOD STANDING

(XX) PLAIN STAMPED COPY

() CERTIFICATE OF STATUS

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Examiner's Initials

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Nobl	<u>e Net Lease IIIH, LLC</u>			
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appeared Limited Liability Company)	rs on our records.		
(////	ida Bililio Blackity Company)			
The Articles of Organization for this Limited Liabil	ity Company were filed on	July 1, 2011	and assigned	
Florida document numberL1100007682	<u>0</u> .			
This amendment is submitted to amend the followir	ng;			
A If amonding name ontou the name of the	limited lighility somnows be	-		
A. If amending name, enter the new name of the	milited hadnity company ne	<u>re</u> ;		
The new name must be distinguishable and end with the	woode "I in ited I inhility Comm	ante " the designation "T	I C" or the althoughtion	
"L.L.C."	e words Limited Liability Comp	any, the designation L	.c. or the abbreviation	
Enter new principal offices address, if applicable	, >			
(Principal office address MUST BE A STREET A	DDBECC)			
Tracipal office unaress most BEASTREET A.	DD(E55)			
	·			
Enter new mailing address, if applicable:				
•			_	
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>			
B. If amending the registered agent and/or r	egistered office address on	our records, enter t	he name of the new	
registered agent and/or the new registered office		<u> </u>	THE HALL OF THE HOLE	
Name of New Registered Agent:	···			
New Registered Office Address:				
New Yorkstead Office Address.	Enter Florida street address . Florida			
_	City	, FIOTICIA	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Traci L. Ambrosino	5821 C Lake Worth Rd. Greenacres, FL 33463	Add ☑ Remove
<u>MGR</u>	Paul Forberger	5821 C Lake Worth Rd. Greenacres, FL 33463	Add Remove
MGRM	Noble Net Lease III, LLC	5821 C Lake Worth Rd. Greenacres, FL 33463	_☑ Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_
			-
			_ _
Dated	11,10, 20 Mac	Lal	
	, ,	or authorized representative of a member aci L. Ambrosino	
_	Typed	or printed name of signee	

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