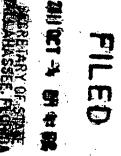
(Requestor's Name)	
	Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions	to Filing Officer:	
	A. LUNT	
	OCT -5 2011	
	EXAMINER	

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COVER LETTER

TO: Registration Section Division of Corporations	
	s Fund XI, LLC d Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Jonathan S. Gelman Name of Person	
Greenberg Traurig, P.A. Firm/Company	
401 East Las Olas Boulevard, Suite 200 Address	00
Fort Lauderdale, Florida 33301 City/State and Zip Code	
E-mail address: (to be used for future annual report notification for further information concerning this matter, ple	
Jonathan S. Gelman at (at (954) 768-8213 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following am	ount:
\$25 Filing Fee	

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:	Las Olas Fund XI, LLC		
2. (a) Principal office address of limited liability company	401 East Las Olas Boulevard		
(Note: MUST BE STREET ADDRESS)	Suite 2200 Fort Lauderdale, Florida 33301		
(b) Mailing address of limited liability company:	401 East Las Olas Boulevard		
(Note: MAY BE POST OFFICE BOX)	Suite 2200 Fort Lauderdale, Florida 33301		
9/14/2011	L11000105300		
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:	Timothy E. Bannon		
Registered Office Address:	401 East Las Olas Boulevard Suite 2200 Fort Lauderdale, Florida 36 1		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address			
NEW Registered Agent:	Robert J. Puck		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	401 East Las Olas Boulevard Suite 2200 Fort Lauderdale		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating afterment of the limited liability company. Signature of a member or authorized representative of a member.	lorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization		
Robert J. Puck	_		
Printed or typed name of signee	was to not in this converte. I Gother was		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my particular to the configuration of the properties of the companient is being filed to mand address, I hereby confirm that the limited liability companient	igree to act in this capacity. I filtiner agree to oper and complete performance of my duties, sition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00