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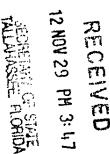
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PICK-UP	☐ WAIT	MAIL				
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CORPDIRECT AGES 515 EAST ARK AVI TALLAHASSEE, FL 222-1173	ENUE	erly CCRS)				
FILING COVER S ACCT. #FCA-14	SHEET					
CONTACT:	MICHELE HO	<u>OLDEN</u>				
DATE:	11/29/2012					
REF. #:	000076.176738	1				
CORP. NAME: BH III PARTNER HOLDINGS LLC						
() ARTICLES OF INCO	RPORATION	() ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION			
() ANNUAL REPORT		() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME			
() FOREIGN QUALIFIC	CATION	() LIMITED PARTNERSHIP	() LIMITED LIABILITY			
() REINSTATEMENT		() MERGER	() WITHDRAWAL			
() CERTIFICATE OF C	CANCELLATION					
(XX) OTHER: CHAN	GE OF REGISTER	ED AGENT				
STATE FEES PREPAID WITH CHECK# 102112 FOR \$ 25.00						
AUTHORIZATI	ON FOR AC	COUNT IF TO BE DEBITEI):			
COST LIMIT: \$						
PLEASE RETUR	RN:					
() CERTIFIED COPY () CERTIFICATE OF GOOD STANDING (XX) PLAIN STAMPED COPY						
() CERTIFICATE O						

Examiner's Initials

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.	Nar	ne of the limited liability company: BHIII PARTNER HOL	DINGS LLC		
2.	(a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	2711 S. OCEAN DRIVE #2404 HOLLYWOOD FL 33019		
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2711 S. OCEAN DRIVE #2404 HOLLYWOOD FL 33019		
09	/21/20	112	L12000121031		
3.	Dat	te of filing/registration in Florida	4. Document number	<u> </u>	
5.	(a)	Registered Agent and Registered Office shown on t	he records of the Florida Dept.	of State:	
		Registered Agent:	FREEDMAN, JARRET		
		Registered Office Address:	2711 S. OCEAN DRIVE #2404 HOLLYWOOD FL 33019 US		
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:		
		NEW Registered Agent:	NRAI SERVICES, INC.		
NEW Registered Office Address:		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	515 EAST PARK AVENUE		
		(MOST BE TEORIDA STREET ADDRESS)	TALLAHASSEE	FL_32301	
ar lia	onfir nd th abilit ne me	limited liability company is not organized under the l med that after the change or changes are made, the Flue business office of the registered agent will be ident ty company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise perating agreement of the limited liability company.	orida street address of the regis ical. Or, in the case of a Florida was/were authorized by an affi	tered office a limited rmative vote of	
Si	gnatu	re of a member or authorized representative of a member	_	SECRETOR S	
P	rinted	or typed name of signee	_		
I ci	here ompi nd I hap daye	eby accept the appointment as registered agent and a ly with the provisions of all statutes relative to the pr am familiar with and accept the obligations of my poter 608, F.S. Or, if this document is being filed to me as, I hereby confirm that the limited liability company	gree to act in this capacity. I fi oper and complete performance sition as registered agent as pa rely reflect a change in the regi y has been notified in writing of	irther agree to lef my duties, oyided for in stered office this change.	

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