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From:

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Account Number : I20060000021 Phone : (561)833-9800 Fax Number : (561)655-5551

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Dana. Walkup@Saul.com Email Address:

## LLC REGISTERED AGENT CHANGE DOHERTY FLORIDA TOWN CENTER, LLC

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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 605.0114 or 605.0116, 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. Na	me of the limited liability company: DOHERTY FL	ORID	A TOWN	CENTER, 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)	
	7 PEARL COURT		7 PEARL COURT		
	ALLENDALE, NJ 07401	<del></del>	ALLEN	DALE, NJ 07401	
	May 16, 2013		L130000	71893	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)					
J. (u)	Registered Agent and Registered Office shown on the records of the JOHN F. FLANIGAN	he Florida	Dept. of Stat	te:	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	<u> </u>	_	
	660 US HWY ONE, THIRD FLOOR			- S	
	NORTH PALM BEACH , FL	33408		2020 APR 28	
(b)	ANTOINETTE THEODOSSAKOS			fPR	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	22	
	C/O SAUL EWING ARSTEIN & LEHR, LLP			- Mag 5	
	NEW Registered Office Address:				
	515 NORTH FLAGLER DRIVE, SUITE 1400	<u> </u>		<del>-</del>	
	WEST PALM BEACH , FL	33401		_	
Signa  I here provisi the obtion mention to the obtion to	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cless of organization or the operating affect each of the three of a member or authorized representative of a member by accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete inguious of my position as registered agent as provided by reflect a change in the registered office address, I is a first three of Registered Agent.	the reginability confirmated	stered offic ompany, it i nited liabilit liability cor	is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.  Printed or typed name of signife	