2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M0000000116

BURNS, JR, BRIAN P.

100 BUSH STREET, SUITE 1250

SAN FRANCISCO, CA 94104

Name:

Address:

City-St-Zip:

Entity Name: TROUT CREEK PROPERTIES LLC

FILED Oct 06, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
100 BUSH SUITE 125 SAN FRAN				
Current M	lailing Address:	New Mailing Address:		
100 BUSH SUITE 125 SAN FRAN				
In accordan	: 94-3324515 FEI Number Applied For (ce with s. 607.193(2)(b), F.S., the limited liabili	ty company did not receive the prior notice.		
Name and	Address of Current Registered Ager	nt: Name and Address of New Registered	Agent:	
VALDES-FAULI CORPORATE SERVICES, INC. 777 SOUTH FLAGLER DRIVE SUITE 500E WEST PALM BEACH, FL 33401 US		GY CORPORATE SERVICES, INC. 777 SOUTH FLAGLER DRIVE SUITE 500E WEST PALM BEACH FL 33401 LIS	777 SOUTH FLAGLER DRIVE	
The above	·	the purpose of changing its registered office or registere	ed agent, or both,	
SIGNATURE: GY CORPORATE SERVICES, INC.			06	
	Electronic Signature of Registere	d Agent Date		
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	C () Delete BURNS, BRIAN P 100 BUSH STREET SUITE 1250 SAN FRANCISCO, CA 94104	Title: () Change () Addition Name: Address: City-St-Zip:	on	
Title: Name: Address: City-St-Zip:	V () Delete ARONOFF, STUART B 100 BUSH STREET SUITE 1250 SAN FRANCISCO, CA 94104	Title: () Change () Addition Name: Address: City-St-Zip:	on	
Title: Name: Address: City-St-Zip:	V () Delete POST, S. DOUGLAS 100 BUSH STREET SUITE 1250 SAN FRANCISCO, CA 94104	Title: () Change () Addition Name: Address: City-St-Zip:	on	
Title:	P () Delete	Title: () Change () Addition	on	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Name:

Address:

City-St-Zip:

SIGNATURE: S. DOUGLAS POST V 10/06/2006