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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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CT CORPORATION

FILED 03 FEB 24 PM 2: 18

SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 24, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5724865 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

BEL-EQR III, L.L.C. (DE) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff_Netherton@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provis liability company submagent, or both, in the St	ions of sections 608.4 uits the following staten ate of Florida.	16 or 608.508, Florida Stati nent in order to change its r	utes, the undersigned limited egistered offices of the period 2: 18
1. The name of the lim	ited liability company is	s: Bel-EQR III, L.L.C.	SEURETARY OF STATE FALLAHASSEE, FLORIDA
2. The mailing address	of the limited liability	company is: Two Nonh Rivers	ide Plaza, Suite 400
Chicago, IL 60606			·
11/03/2000		M00000002281	
3. Date of filing/registr	ation in Florida	4. Document	number
5. The name of the regis Florida Department of		istered office address as show	vn on the records of the
	Lexis Document Service		
	,	Name	
	3953 W.W. Keiley Road		 _
	C 17 1	Address	
	Tallahassee FL 32311	y, State and Zip	
Z 77	•	•	*
6. The name and addres	is of the new registered	agent and/or office:	
	CT Corporation System	·	
		Name	_
	1200 South Pine Island R	Coad	_
	Florida street addre	ess (P.O. Box NOT acceptabl	e)
	Plantation	FL 33324	
		State and Zip	
confirmed that after the and the business office liability company, it is h	change or changes are of the registered agent value that the tred liability company of the limited liability	or as otherwise provided in the company.	ess of the registered office ase of a Florida limited ized by an affirmative vote of
Paul Foreman			
(Printed or typed name of sign	•		
comply with the provisi and I am familiar with i	ons of all statutes relati and accept the obligation	agent and agree to act in this ive to the proper and complet ons of my position as register g filed to merely reflect a cha lity company has been notifie	ed agent as provided for in
(Signature of Registers d Age		•	
Divis	sion of Corporations, I	P.O. Box 6327, Tallahassee,	FL 32314

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INHS18(10/99)