Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000226492 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0380

From:

: INCORPORATING SERVICES FL Account Name

Account Number : 120050000052

Phone

: (302)531-0855

Fax Number

: (866)223-0765

REGISTERED AGENT CHANGE

HIGHWOODS ORLANDO, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35:00*

\$ 25.00

Electronic Filing Menu

Corporate Filing Menu

Help

1B

Sep. 11. 2007 2:18PM

Incorporating Services, LTD.

No. 5527 P. 12

(((H07000226492 3)))

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

1. The name of the limited liability company is:	
2. The mailing address of the limited liability con	npany is : 3100 SMOKETREE COURT, SUITE
RALEIGH NC 27604	
11/28/2000	M00000002413
3. Date of filing/registration in Florida	4. Document number
1200 SOUTH PINE A PLANTATION FL 33	Address
City, S	S324 US State and Zip ent and/or office:
City, S 6. The name and address of the new registered age INCORPORATING	ent and/or office: SERVICES, LTD.
City, S 6. The name and address of the new registered age INCORPORATING	ent and/or office: SERVICES, LTD.
City, S 6. The name and address of the new registered age INCORPORATING N 1540 GLENWAY DR	ent and/or office: SERVICES, LTD.
City, S 6. The name and address of the new registered age INCORPORATING N 1540 GLENWAY DR Florida street address (TALLAHASSEE	state and Zip ent and/or office: SERVICES, LTD. ame RIVE

confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(3) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization of the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

Jeffrey D. Miller

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is deing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Muse E. South, ASSISTANT Secretion (Signature of Registered Agent)

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

INHS18 (8/05)

(((HD7D00226492 3)))