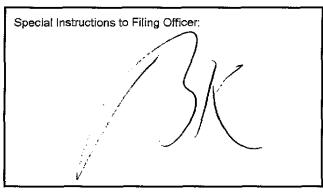
## M02000003226

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(B	usiness Entity Name)
(D	Ocument Number)
Certified Copies	Certificates of Status



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## R (S):

	<u>UUU</u>				
ŧ	SURVICES	December 27, 2005  CORPORATION NAME (S) AND DOCUMENT NUMBER (S)			
i —	SCP 2003D-57 LLC	·			
	Filing Evidence  ☑ Plain/Confirmation Copy	y	Type of Document  Certificate of Status		
	□ Certified Copy		□ Certificate of Good Standing		
			□ Articles Only		
	Retrieval Request  Photocopy		<ul> <li>All Charter Documents to Include</li> <li>Articles &amp; Amendments</li> <li>Fictitious Name Certificate</li> </ul>		
	□ Certified Copy		□ Other		
	NEW FILINGS		AMENDMENTS		
	Profit		Amendment		
	Non Profit		Resignation of RA Officer/Director		
	Limited Liability	X	Change of Registered Agent		
	Domestication		Dissolution/Withdrawal		
	Other		Merger		
	OTHER FILINGS		REGISTRATION/QUALIFICATION		
	Annual Reports		Foreign		
	Fictitious Name		Limited Liability		
	Name Reservation		Reinstatement		
	Reinstatement		Trademark		

Other

## 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.

agent, or both, in the State of Florida.	0 0 2	
1. The name of the limited liability company is:	SCP 2003D-57 LLC	
2. The mailing address of the limited liability company is:	C/O LESTER ROSENBERG	<u></u>
LASALLE-LAKE INVESTORS II, ILC, 55 EAST SU		
12/05/2002	M02000003226	
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registered office Florida Department of State:  C T CORPORATION SYSTEM	address as shown on the recor	ds of the
Name 1200 SOUTH PINE ISLAND	ROAD	
Address PLANTATION, FL 33324 City, State and Z		TILED 2006 DEC 27 PH 12: 39 SECRETASSEE, FLORIDA
6. The name and address of the new registered agent and/or	office:	题。后
NRAI Services, Inc.		SHO P
Name 2731 Executive Park Drive, Suite 4	= .	From From S
Florida street address (P.O. Box	NOT acceptable)	ALE SO
Weston FI 33331		
City, State and Zip		
If the limited liability company is not organized under the lar confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) whe members of the limited liability company or as otherwise the operating agent must of the limited liability company.	rida street address of the regist	ered office limited
(Signature of a member of a marzed typresentative of a member)		
LESTER ROSENBERG	_	
(Printed or typed name of state)		
I hereby accept the appointment as registered agent and agr comply with the provisions of all statutes relative to the prop and I am familiar with and accept the obligations of my posit Chapter 608, F.S. Or, if this document is being filed to mere address, I hereby confirm that the limited liability company I NFAI Services. Inc.	ee to act in this capacity. I fur er and complete performance of tion as registered agent as pro- ly reflect a change in the regis has been notified in writing of t	ther agree to of my duties, vided for in tered office his change.
Signature of Registered Agent)  Division of Corporations, P.O. Poy 637	Tollahassas FY 22214	
Division of Corporations, P.O. Box 6327	, radadassee, FL 32314	

FILING FEE: \$25.00

INHS18(10/99)