m03000001550

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	⇒ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
,		





700081936027

11/20/06--01044--001 **250.00



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.

1. The name of the limite	ed liability company is: N	NN Netpark 18, LLC		
	f the limited liability comp			
1551 N Tustin Avenue, Suit	e 200, ATTN: Entity Complia	nce Manager, Santa Ana, CA	92705	
5/14/2003		M03000001550		
3. Date of filing/registrat	ion in Florida	4. Document nun	nber	
5. The name of the register Florida Department of		ed office address as shown of	on the records of	the
-	LexisNexis Document Solu	tions		
	N	ame		
	1201 Hays Street			
·		dress	≥	0
Tallahassee, FL 32301			SE 3S	
		nte and Zip	8	<u>≅</u> £
6. The name and address	of the new registered agen	t and/or office:	2006 NOV 200	FILE TARY OF CO
	NRAI Services, Inc.		-	LED Y OF STATE CORPORATIONS
	Nar	me	4: 09	RAI
	2731 Executive Park Drive,	Suite 4	9	<u> </u>
	Florida street address (P	P.O. Box NOT acceptable)	w	ক্ট
	Weston F	L 33331		
	City, State	e and Zip		
confirmed that after the cl	hange or changes are made the registered agent will be reby confirmed that the che d liability company or as of the limited liability com	ler the laws of the State of Fe, the Florida street address of the identical. Or, in the case ange(s) was/were authorized otherwise provided in the argument.	of the registered	office
Paul J. Hagan, attorney-in-f (Printed or typed name of signee))			
I hereby accept the apportunity with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm MRAI Services, Inc. (1) (AAA) (Signature of Registered Agont) Paul J. Hagan, Assistant Services		it and agree to act in this ca the proper and complete po f my position as registered a d to merely reflect a change ompany has been notified in	pacity. I further erformance of m igent as provide in the registered writing of this d	agree to y duties, d for in d office change.
Paul J. Hayan, Assistant Se Divisio	on of Corporations, P.O.	Box 6327, Tallahassee, FL	32314	

INHS18(10/99)

FILING FEE: \$25.00