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NAME: MAKAR SOUTH BEACH INVESTORS LLC

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AUTHORIZATION: PAUL / ABBLE HOGGE

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 limited liability company is:	MAKAR SOUTH BEACH INVESTORS, LLC
2. The mailing address of the limited liability con	npany is : <u>4100 MACARTHUR BLVD., SUITE 200</u> .
NEWPORT BEACH, CA 92660	
06/04/2004	M04000002165
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the regist Florida Department of State:	ered office address as shown on the records of the
CORPORATION SERVI	CE COMPANY
TALLAHASSEE, FL 323	CE COMPANY Name Address O1 State and Zip ent and/or office: ame e, Suite 4
6. The name and address of the new registered ag	State and Zip ent and/or office:
NRAI Services, Inc.	
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2731 Executive Park Driv	e, Suite 4
riorida street address	(P.O. Box NOT acceptable)
Weston	FL 33331
City, Sta	ate and Zip
and the business office of the registered agent will liability company, it is hereby confirmed that the c	de, the Florida street address of the registered office be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote r as otherwise provided in the articles of organization
(Signature of a member or authorized representative of a member)	
Koren Evens	
(Printed or typed name of signee)	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 608, F.S. Or, if this document is being fill address, I hereby confirm that the limited liability NRAI Services. Inc.	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office company has been notified in writing of this change.
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00