

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M04000003946

Entity Name: USRP I, LLC

**FILED**  
**Apr 18, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

4350 EAST-WEST HIGHWAY, SUITE 400  
C/O FIRST WASHINGTON REALTY, INC.  
BETHESDA, MD 20814

**New Principal Place of Business:**

121 WEST FORSYTH STREET  
SUITE 200  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

4350 EAST-WEST HIGHWAY, SUITE 400  
C/O FIRST WASHINGTON REALTY, INC.  
BETHESDA, MD 20814

**New Mailing Address:**

121 WEST FORSYTH STREET  
SUITE 200  
JACKSONVILLE, FL 32202

FEI Number: 20-2852387

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

F & L CORP.  
ONE INDEPENDENT DRIVE, SUITE 1300  
JACKSONVILLE, FL 32202 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHARLES V. HEDRICK

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: FIRST WASHINGTON REA, LTY INC.  
Address: 4350 EAST-WEST HIGHWAY, SUITE 400  
City-St-Zip: BETHESDA, MD 20814

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: USRP 1 HOLDING, LLC,  
Address: 121 WEST FORSYTH STREET  
City-St-Zip: JACKSONVILLE, FL 32202

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KATHY D. MILLER

VP

04/18/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date