## M04000004210

(Re	equestor's Name)	_		
(Ad	ldress)			
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2006 MOV 20 PH 3: 34
SECRETARY OF STATE



## 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: NNN Fountain Square 15, LLC				
	. The mailing address of the limited liability company is :				
15	551 N Tustin Avenue, Suite 200, ATTN: Entity Compliance Manager, Santa Ana, CA	92705			
10	0/5/2004 M04000004210				
3.	. Date of filing/registration in Florida 4. Document numb	4. Document number			
	. The name of the registered agent and the registered office address as shown on Florida Department of State:	the records of th	le		
	Corporation Service Company				
	Name				
	1201 Hays Street	- 2			
	Address	AE DE			
		LGR NO	e i		
Tallahassee, FL 32301 City, State and Zip		E E	CHESTON		
	City, State and Zip	20 , SS	3		
6.	. The name and address of the new registered agent and/or office:	2006 NOV 20 PM 3: 34 SECRETARY OF STATE TALLAHASSEE.FLORIDA			
	NRAI Services, Inc.	3: 34 STATE FLORID	Cept.		
	Name	걸음 2			
	2731 Executive Park Drive, Suite 4	>			
	Florida street address (P.O. Box NOT acceptable)				
	Weston FL 33331				
	City, State and Zip				
co an lia th th	The limited liability company is not organized under the laws of the State of Floorismed that after the change or changes are made, the Florida street address of a dility company, it is hereby confirmed that the change(s) was/were authorized ne members of the limited liability company or as otherwise provided in the article operating agreement of the limited liability company.	f the registered of f a Florida limited by an affirmative	ffice d vote of		
_	Paul J. Hagan, attorney-in-fact Printed or typed name of signee)				
	hereby accept the appointment as registered agent and agree to act in this cap omply with the provisions of all statutes relative to the proper and complete per and familiar with and accept the obligations of my position as registered as the obligations of my position as registered as the complete 608, F.S. Or, if this document is being filed to merely reflect a change is directly company has been notified in IRAI Services. Inc.  IRAI Services. Inc.  Signature of Registered Agents  Paul J. Hagan, Assistant Secretary  Division of Corporations, P.O. Box 6327, Tallahassee, FL		gree to luties, for in office ange.		

FILING FEE: \$25.00

INHS18(10/99)