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LLC REGISTERED AGENT CHANGE **SCP 2004E-517 LLC**

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K. BALY EXAMINER DEC 1 0 2010 H100002650163

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. Name of the limited liability company: SCP 20048	-517 LLC
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	
(b) Mailing address of limited liability company: (Note: MAY RE POST OFFICE BOX)	MACKLOWE MNGMT NY NY MERCE 10022
12/01/2004	4 M00000005253
3. Date of filing/registration in Florida	4 Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State;
Registered Agent:	CT CORPORATION SYSTEM
Registered Office Address:	the records of the Florida Dept. of State: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 W Registered Office address:
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	Registered Agent Solutions, Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Dr., Suite A
A STATE OF THE STA	Tellabasses ,FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chareby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of imited liability company.	laws of the State of Florida, it is hereby confirmed taddress of the registered office and the business are of a Florida limited liability company, it is by an affirmative vote of the members of the limited forganization or the operating agreement of the
Corole Brundole	_
Signature of a member of authorized@spresontative of a member)	
CAROLE KRUMBHOLZ, AUTHORIZED PERSON (Printed or Typed name of signes)	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provision familiar with and accept the obligations of my position in Samiliar with and accept the obligations of my position is S. Or, if this document is being filled to merely reflect a confirm that his limited liability company has been notified	gree to act in this capacity. I further agree to iper and complete performance of my dylies, and l as registered agent as proyided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.
(Signature of Regulatered Agent)	

INHS18 (05/08)

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