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T. CLINE

- APR **19** 2010

**EXAMINER** 

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## 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:MCZ/C	ENTRUM FLORIDA VIII, L.L.C.
2. (a) Principal office address of limited liability company	225 WEST HUBBARD, 4TH FLOO
(Note: MUST BE STREET ADDRESS)	CHICAGO, IL 60654
(b) Mailing address of limited liability company:	225 WEST HUBBARD, 4TH FLOOR
(Note: MAY BE POST OFFICE BOX)	CHICAGO, IL 60654
4/04/2005	M05000001747
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	CORPORATION SERVICE COMPANY
Registered Office Address:	1201 HAYS STREET CONTROL TALLAHASSEE, FL 32301 →
	S 5 5 6
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:
<u>NEW</u> Registered Agent:	STEVEN NEWBURGH OF STEVEN NEWBURGH
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	C/O COHEN, NORRIS, SCHEREF 712 U.S. HIGHWAY ONE, STE 400 NORTH PALM BEACH ,FL33408
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Fle and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or is otherwor the operating agreement of the limited liability company.	aws of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization
Signature of a member hr authorized representative of a member	
STEVEN NEWBURGH	
Printed or typed name of signoc	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro- and I am famillar with and affect the obligations of my pos Chapter 608, R.S. Or, if this cocument is being filed to mer- address, I hereby confirm that the limited hability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent	<b>- - - - - - - - - -</b>

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INH\$18 (05/08)