

M05000002507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000168505130

RECEIVED

10 FEB 19 PM 4:21

OFFICE OF THE  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR

FEB 22 2010

EXAMINER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 FEB 19 AM 9:57



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 279983 4391782

AUTHORIZATION :

*[Signature]*

COST LIMIT : \$ 25.00

ORDER DATE : February 19 2010

ORDER TIME : 3:06 PM

ORDER NO. : 279983-006

CUSTOMER NO: 4391782

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 FEB 19 AM 9:57

CHANGE OF AGENT

NAME: CRT CTA GP LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS: \_\_\_\_\_

**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: CRT CTA GP LLC

2. (a) Principal office address of limited liability company: 2101 6th Avenue North  
Suite 750  
Birmingham, AL 35203

(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company: 2101 6th Avenue North  
Suite 750  
Birmingham, AL 35203

(Note: **MAY BE POST OFFICE BOX**)

05/11/2005

M05000002507

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: C T Corporation System

Registered Office Address: 1200 South Pine Island Road  
Plantation, FL 33324

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent: Corporation Service Company

**NEW** Registered Office Address: 1201 Hays Street  
Tallahassee, FL 32301

(**MUST BE FLORIDA STREET ADDRESS**)

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

David Luski

(Printed or typed name of signee)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

By: Sylvia Queppet

(Signature of Registered Agent) Sylvia Queppet, Asst. VP

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

**FILING FEE: \$25.00**

FILED  
DIVISION OF CORPORATIONS  
10 FEB 19 AM 9:51