M05000003022

(Re	equestor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	; #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE SECRETARY OF CORPORATIONS

J. BRYAN NOV 2-1 2006

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.

	3 .		
1. The name of the limite	ed liability company	vis: NNN Naples Laurel Oak	12, LLC
2. The mailing address of	f the limited liability	y company is :	···································
1551 N Tustin Avenue, Suit	te 200, ATTN: Entity (Compliance Manager, Santa Ana, CA	A 92705
6/6/2005		M05000003022	
3. Date of filing/registration in Florida 4. Document r		mber	
5. The name of the register Florida Department of		egistered office address as shown	on the records of the
f	Corporation Service	e Company	
	·	Name	-
	1201 Hays Street		- 30 Sivid
		Address	SELVISI
Tallahassee, FL 32301		SECRET SECRET OF NOV	
	C	City, State and Zip	FIL OF C
6. The name and address of the new registered agent and/or office:		CORPO AM	
	NRAI Services, Inc.		8. RAT
	2731 Executive Park	Name k Drive, Suite 4	TO TOHS
	Florida street add	iress (P.O. Box NOT acceptable)	
	Weston	FI 33331	
		ty, State and Zip	•
confirmed that after the cand the business office of liability company, it is he	hange or changes are the registered agen reby confirmed that deliability company of the limited liability.		of the registered office of a Florida limited ed by an affirmative vote of
comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm NRAI Services Nife.	intment as reoistere	ed agent and agree to act in this ca ative to the proper and complete p tions of my position as registered ing filed to merely reflect a chang bility company has been notified i	apacity. I further agree to performance of my duties, agent as provided for in e in the registered office in writing of this change.
(Stanature of Registered Agent) Paul J. Hagan, Assistant So Divisio	ecretary on of Corporations	s, P.O. Box 6327, Tallahassee, Fl	L 32314

FILING FEE: \$25.00

INHS18(10/99)