M05000003328

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SECRETARY OF STATE DIVISION 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.

1. The name of the limited liability company	y is: NNN Naples Laurel Oak 27, L	LC	
2. The mailing address of the limited liability			
1551 N Tustin Avenue, Suite 200, ATTN: Entity	Compliance Manager, Santa Ana, CA 927	<u>'05</u> .	
6/20/2005	M05000003328		
3. Date of filing/registration in Florida	4. Document number	4. Document number	
5. The name of the registered agent and the reFlorida Department of State:	registered office address as shown on th	e records of the	
Corporation Service			
	Name		
1201 Hays Street	Address	0	
Tallahassaa El 20	Address	90 SEA	
Tallahassee, FL 32	City, State and Zip	5	
6. The name and address of the new registere	•	SECRETARY IVISION OF CO	
NPAI Seniors Inc.		A ROPO	
NRAI Services, Inc.	Name		
2731 Executive Parl		STATE RATION: 8: 09	
Florida street add	dress (P.O. Box NOT acceptable)	99	
Weston	FL 33331		
Cit	ty, State and Zip		
If the limited liability company is not organize confirmed that after the change or changes are and the business office of the registered agentiability company, it is hereby confirmed that the members of the limited liability company the operating agreement of the limited liability.	re made, the Florida street address of the twill be identical. Or, in the case of a tithe change(s) was/were authorized by or as otherwise provided in the article ity company.	ne registered office Florida limited an affirmative vote of	
(Signature of a vnember or authorized representative of a m	nember)		
Paul J. Hagan, attorney-in-fact			
(Printed or typed name of signee)			
I hereby accept the appointment as registere comply with the provisions of all statutes reliand I am familiar with and accept the obligate Chapter 608, F.S. Or, if this document is be address, I hereby confirm that the limited lian NRAI Services inc. All (A) (Signature of Registered Agent) Paul J. Hagan. Assistant Secretary	ative to the proper and complete perfor tions of my position as registered agen ing filed to merely reflect a change in to ability company has been notified in wri	rmance of my duttes, it as provided for in he registered office iting of this chänge.	
Division of Corporations	s, P.O. Box 6327, Tallahassee, FL 323	314	

FILING FEE: \$25.00

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