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ACCOUNT NO. : 072100000032

REFERENCE :

4326756

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE: May 22, 2006

ORDER TIME : 10:21 AM

ORDER NO. : 125217-035

CUSTOMER NO: 4326756

CHANGE OF AGENT

NAME: CORPORATE CENTER ONE OWNER LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Amanda Haddan

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. The name of the limited liability company is: CORPORATE CENTER ONE OWNER LLC 2. The mailing address of the limited liability company is : 400 South Tryon, Suite 1300, Charlotte, NC 28202 08/09/2005 M05000004434 4. Document number 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Fiorida Department of State: CT Corporation System Name 1200 South Pine Island Road Address Plantation, FL 33324 City, State and Zip 6. The name and address of the new registered agent and/or office: Corporation Service Company Name 1201 Hays Street Florida street address (P.O. Box NOT acceptable) Tallahassee FL 32301 City, State and Zip 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. ber or althorized representative of a member)

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 im familiar with and accept the obligations of my position as registered agent as provided for in Chapter 508, F.S. Or, if this document is being filed to merely reflect a change in the registered office widress. Thereby confirm put the limited liability company has been notified in writing of this change.

Tadith Reves

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

Judith Reyes Asst. Secretary

John Carter

(Printed or typed name of signee)