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B. KOHR

MAY - 7 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE :

7285074

J. R. LANDSEE S. 15

AUTHORIZATION

COST LIMIT

ORDER DATE: April 30, 2009

ORDER TIME: 12:38 PM

ORDER NO. : 978282-081

CUSTOMER NO: 7285074

CHANGE OF AGENT

NAME: BOA PARTNERSHIP GP, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace

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: BOA PAR	TNERSHIP GP, L.L.C.
2. (a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	
	Chicago, IL 60611
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Chicago, IL 60611 3737 North Michigan Avenue Chicago, IL 60611
	Chicago, IL 60611
09/09/2005	M05000004994
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	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 <u>NEW Registered Agent</u> and/or <u>NE</u>	EW Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address:	1201 Hays Street
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida streeting of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company. Signature of a member or authorized representative of a member)	eet address of the registered office and the business case of a Florida limited liability company, it is
Maureen Cullen, Authorized Person (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the promise familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified to provide the company of the compa	
(Signature of Registered Agent) Michelle R. Vannoy, Asst.	
Division of Corporations, P.O. Box FILING FER	
	24 WAU:00