

## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC

Account Number : 120020000094

Phone

: (770)777~2091

Fax Number

: (770)220-1943

## REGISTERED AGENT CHANGE

FIRST STATES INVESTORS 4000A GP. LLC

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EXAMINER

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Sursuant to the provisions of sections 608.416 or 608.5 company submits the following statement in order to ch in the State of Florida.		islered agent, or	both,
1. Name of the limited liability company: FIRST STATES	INVESTORS 4000A GP, LLC	***************************************	
<ol> <li>(a) Principal office address of limited liability compa (<u>Note: MUST BE STREET ADDRESS</u>)</li> </ol>	ny: 420 Lexington Ave 19th Floor New York, NY 10170	<u> </u>	
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	680 Old York Road Jenkintown, PA 19046	JUL 22	FLE
•	man Lader de la company de la	FLOR	Ö
12/30/2005	M05000007152		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown o	on the records of the Florida Dept	. of State:	
Registered Agent:	CORPORATION SERVICE CO	MPANY	
Registered Office Address:	1201 HAYS STREET TALLAHASSEE FL 32301-0525 US		<b>=</b>
NEW Registered Agent:  NEW Registered Office Address:	NRAI Services, Inc. 2731 Executive Park Drive, Suite 4		•
MUST BE FLORIDA STREET ADDRESS)	Weston	,FL <u>33331</u>	
If the limited liability company is not organized under the that after the change or changes are made, the Florida strooffice 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.	eet address of the registered offic case of a Florida limited liability I by an affirmative vote of the me	e and the busine company, it is mhers of the live	ss vited
/s/Edward J. Matey Jr. (Signature of a member or authorized representative of a member)	<del></del> .		
Edward J. Matey Jr., V.P. (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 p am familiar with and accept the obligations of my position. S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notific	agree to act in this capacity. I fi proper and complete performance in as registered agent as provided a change in the registered office a ed in writing of this change.	urther agree to c of my duties, ar d for in Chapter address, I hereby	nd I 608, v
(Signature of Registered Agent) ennifer Malik, Assistant Secretary			
Division of Corporations, P.O. Bo FILING FE			