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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 limite	ed liability company is	s: NNN Doral Court 3	3, LLC		
2. The mailing address of				,	
1551 N Tustin Avenue, Suit	te 200, ATTN: Entity Co	mpliance Manager, Santa	Ana, CA 92705		
1/20/2006		M0 5 0000	M0500000340		
3. Date of filing/registration in Florida		4. Docur	4. Document number		
5. The name of the register Florida Department of		istered office address as	shown on the reco	rds of the	
-	Corporation Service C	Company			
		Name			
	1201 Hays Street				
		Address	——— —	_	
Tallahassee, FL 32301			AL SEC	96	
	City	y, State and Zip		₹ 💆	
6. The name and address of the new registered agent and/or office:			ASSE	FILE	
	NRAI Services, Inc.		ūd		
		Name	FLORIDA		
	2731 Executive Park D			7	
	Florida street addre	ess (P.O. Box NOT acce	ptable)		
	Weston	FL 33331			
	City,	State and Zip			
If the limited liability conconfirmed that after the cland the business office of liability company, it is her the members of the limite the operating agreement of the limite the operation of the limited liability concentration of the limited liability company in the limited liability company.	hange or changes are the registered agent were that the diability company of the limited liability	made, the Florida street will be identical. Or, in the change(s) was/were at a sotherwise provided company.	address of the regist the case of a Florid outhorized by an aff	stered office la limited irmative vote of	
Paul J. Hagan, attorney-in-f (Printed or typed name of signee) I hereby accept the appointment of the provision and the) intment as registered	agent and agree to act is ve to the proper and cor	n this capacity. I fi nplete performance	urther agree to e of my duties,	
comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm NRAI Services. Inc. VALL (ICA) Signature of Registered Agent) Paul J. Hagan. Assistants of Division	ecretary	ons of my position as reg of filed to merely reflect a lity company has been n ——————————————————————————————————		ovided for in istered office f this change.	

FILING FEE: \$25.00

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