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(City/State/Zip/Phone #)				
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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 limit	ed liability company is: NNN Dor	al Court 34, LLC	·
	of the limited liability company is:		-
1551 N Tustin Avenue, Sui	te 200, ATTN: Entity Compliance Man	ager, Santa Ana, CA 9	2705
1/20/2006		M05000000342	
		4. Document numb	er
5. The name of the registresist. Florida Department of	ered agent and the registered office State:	address as shown on	the records of the
	Corporation Service Company		
	Name		
	1201 Hays Street		
	Address		٦,, ٥
	Tallahassee, FL 32301 City, State and Z	/in	ALL ALL
	·	-	A주 0 F
Tallahassee, FL 32301 City, State and Zip 6. The name and address of the new registered agent and/or office: NRAI Services, Inc. Name 2731 Executive Park Drive, Suite 4 Florida street address (P.O. Box NOT acceptable)			20 ASSI
	NRAI Services, Inc.		PH 4: 19
	Name		FC #:
	2731 Executive Park Drive, Suite 4)RIT 5
	Florida street address (P.O. Box	NOT acceptable)	A
	Weston FL 3333	1	
	City, State and Zi	p	
confirmed that after the cand the business office of liability company, it is he the members of the limite the operating agreement of the limite the operation of the limite the operation of the limite the limite the operation of the limite the operation of the limite the operation of the limite the limite the operation of the limite the limite the limite the operation of the limite the li	mpany is not organized under the lathange or changes are made, the Flof the registered agent will be identified the confirmed that the change(s) red liability company or as otherwise of the limited liability company.	orida street address of	the registered office
Paul J. Hagan, attorney-in-	fact		
(Printed or typed name of signee		•	
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm NHAI Services, inc. (Signature of Registered Agent) Paul J. Hagan, Assistant S	nintment as registered agent and agens of all statutes relative to the property of the obligations of my post this document is being filed to mere that the limited liability company ecretary	ree to act in this capa per and complete perf ition as registered ago ely reflect a change in has been notified in w	city. I further agree to ormance of my duties, ent as provided for in the registered office vriting of this change.
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314			

FILING FEE: \$25.00

INHS18(10/99)