m060000004406

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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600081852376

11/20/08--01018--003 **250.00

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	NNN DCF Campus Manager, LLC
2. The mailing address of the limited liability of	
1551 N Tustin Avenue, Suite 200, ATTN: Entity Co	ompliance Manager, Santa Ana, CA 92705
8/9/2006	M06000004406
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the reg Florida Department of State:	istered office address as shown on the records of the
Corporation Service C	Company
	Name 35 6
1201 Hays Street	Fro 5
120 t Hayo Groot	Address Re 2
Tallahassee, FL 32301	
	y, State and Zip
6. The name and address of the new registered	$\frac{\pi^{m}}{2}$
NRAI Services, Inc.	P'''
2731 Executive Park D	Name
Florida street addre	ess (P.O. Box NOT acceptable)
Weston	FL 33331
City,	State and Zip
confirmed that after the change or changes are and the business office of the registered agent y	d under the laws of the State of Florida, it is hereby made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited ne change(s) was/were authorized by an affirmative vote of r as otherwise provided in the articles of organization or company.
Paul J. Hagan, attorney-in-fact (Printed or typed name of signee)	
comply with the provisions of all statutes relational I am familiar with and accept the obligation Chapter 608, F.S. Or, if this document is being address, I hereby confirm that the limited liabily NRAI Services life. (Signature of Registered Agent) Paul J. Hagan. Assistant Secretary	agent and agree to act in this capacity. I further agree to ve to the proper and complete performance of my duties, ons of my position as registered agent as provided for in gilled to merely reflect a change in the registered office lity company has been notified in writing of this change.

FILING FEE: \$25.00