Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future of annual report mailings. Enter only one email address please.

II MAY -6 AM 9: 35 MICHETARY OF STATE LLAHASSEE, FLORID

LLC REGISTERED AGENT CHANGE GULFSTREAM IV, LLC

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D. BRUCE

MAY 09 2011

EXAMINER

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Corporate Filing Menu

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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Gulfstream IV, LLC			
Name of Lin	nited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing	<u> </u>	
Please return all correspondence concerning the	is matter to the following:		
Aimee Knoller			
Name of Person			
GE Cupital Real Estate			
Firm/Company			
901 Main Avenue		THAY	
Address		() -< () +	
	S C C C C C C C C C C C C C C C C C C C	<u></u> o	
Norwalk, CT 06851	Çri	SE SE	17
City/State and Zip Code		ي بغ	#7mais
aimee.knoller@ge.com	<u> </u>	(A) (A)	
E-mail address: (to be used for future annual report notifi	ication)		
For further information concerning this matter,			
Aimee Knoller	t (²⁰³) ⁷⁵⁰⁻⁷⁰⁸⁹		
Name of Person	Area Code & Daytime Telephone Number	-	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following a	amount:		
☐ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

ЕСО15 - 11/16/2010 СТ Буродох Онійна

INHS18 (5/08)

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: Gulfstream IV, L	LC	
2. (a) Principal office address of limited liability compar	ny: 3250 Wilshire Boulevard	
(Note: MUST BE STREET ADDRESS)	Suite 1106 Los Angeles, CA 90010	
(b) Mailing address of limited liability company:	3250 Wilshire Boulevard	
(Note: MAY BE POST OFFICE BOX)	Suite 1106 Los Angeles, CA 90010	
August 29, 2006	M06000004774	
3. Date of filing/registration in Florida	4. Document number	
5.(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State		
Registered Agent:	Paracorp Incorporated	
Registered Office Address:	236 East 6th Avenue Tallahassee, FL 32303	
	E. 10	
(b) Enter name of NEW Registered Agent and/or NE	<u> </u>	
NEW Registered Agent:	C T Corporation System	
NEW Registered Office Address:	1200 South Pine Island Road	
MUST BE FLORIDA STREET ADDRESS)	Plantation ,FL 33324	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the I and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization	

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter put this document is being filed to merely reflect a change in the registered office address the company that the limited liability company has been notified in writing of this change.

By: Accident Socialal

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

GULFSTREAM IV, LLC

By: Gulfstream-B3 Holdco, LLC, its Sole Member

By: General Electric Credit Equities, Inc., its Sole Member

Amy Jacksen Avala, Assistant Secretary

11 MAY -6 AM 9: 35