## M06000004929

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>?</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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2015 DEC 30 AM II: 39
SECRETARY OF STATE

JAN - 6 2013 T. **HAMPTON** 



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Elizabeth Dawson edawson@cscinfo.com

Date: December 27, 2013

Order#: 922249-045

Re: NNN DCF CAMPUS 3, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Elizabeth Dawson c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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: NNN DCF CAM	MPUS 3, LLC	
2. (a) Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	750 B. Street, Suite 1220 San Diego, CA 92101	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	750 B. Street, Suite 1220 San Diego, CA 92101	
09/08/2006	M06000004929	
3. Date of filing/registration in Florida 4	. Document number	
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:	
Registered Agent:	NRAI Services, Inc.	
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	<u> </u>
	<u> </u>	
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NEW</b>	Registered Office address:	
NEW Registered Agent:		
NEW Registered Office Address:	1201 Hays Street	
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
If the limited liability company is not organized under the lat that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the ca hereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company.  (Signature of a member or authorized representative of a member)	address of the registered office and the businesse of a Florida limited liability company, it is	SS
Dona Priebe, Authorized Person (Printed or typed name of signee)		
I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the provision am familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified By:	ree to act in this capacity. I further agree to per and complete performance of my duties, an as registered agent as provided for in Chapter hange in the registered office address, I hereby in writing of this change.	ıd I 608, '
(Signature of Registered Agent) Elizabeth A. Dawson, Asst. Vice President		
Division of Corporations, P.O. Box	5327, Tallahassee, FL 32314	

**FILING FEE: \$25.00**