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SECRETARY OF STATE OF CORPORATIONS

COVER LETTER

Division of Corporations CFO2 Palm Beach III GP, LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Denise Bell Name of Person NRAI Corporate Services Firm/Company 16055 Space Center Blvd., Ste. 235 Address Houston, TX 77062 City/State and Zip Code dbell@nrai.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Denise Bell 800 862-5438 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ✓ \$25 Filing Fee \$55 Filing Fee & Certified Copy

TO:

Registration Section

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:	CFO2 Palm Beach III GP	2 Palm Beach III GP, LLC	
2. (a) Principal office address of limited liability comp	any: 100 Waugl	100 Waugh, Ste. 600	
(Note: MUST BE STREET ADDRESS)	Houston, TX 77007	= 3	
(b) Mailing address of limited liability company:		78. 25.	
(Note: MAY BE POST OFFICE BOX)		3	
10/20/2006	M06000058	320 9 RA	
3. Date of filing/registration in Florida	4. Document number	I I	
5. (a) Registered Agent and Registered Office shown	on the records of the Florida De	ept. of State:	
Registered Agent:	CT Corporation System	OT Corporation System	
Registered Office Address:	1200 South Pine Island F Plantation, FL 33324	1200 South Pine Island Road Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NRAI Services, Inc.	<u>ss</u> :	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	515 East Park Avenue		
	Tallahassee	_,FL <u>32301</u>	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	ne laws of the State of Florida, is Florida street address of the resentical. Or, in the case of a Florical was/were authorized by an element of the provided in the articles any.	it is hereby gistered office rida limited affirmative vote of organization	
Victor Alfano Printed or typed name of signee			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability composition Services. Inc.	d agree to act in this capacity. proper and complete performan position as registered agent as merely reflect a change in the ri any has been notified in writing	I further agree to nce of my duties, provided for in egistered office of this change.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent Denise Bell, Asst. Secy.