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EXAMINER

10 AUG 16 AM 8:



1203 Governors Square BIVJ. Tallahassee, Ft. 32301-2960 850 222 1092 tel 850 878 5368 fax www.ctlegalsolutions.com

August 16, 2010

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Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

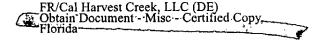
Re: Order #: 7910627 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

FR/Cal Harvest Creek, LLC (DE) Change of Agent Florida



Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Christina McNeair
CL Operations Specialist
Christina.McNeair@wolterskluwer.com

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: FR/	Cal Harvest Creek, LLC	
Name o	f 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	g this matter to the following:	
Gary Neumeier		
Name of Person		
CB Richard Ellis Investors L	LC	
Firm/Company		
515 South Flower Street, Suite	3100	
Address		
Los Angeles, CA 90071		
City/State and Zip Code		
gneumeier@cbreinvestors.cc E-mail address: (to be used for future annual report	om	
E-mail address: (to be used for future annual report	notification)	
For further information concerning this mat	ter, please call:	
Gary Neumeier	at (213) 683-4200	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section 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	g amount:	
\$25 Filing Fee	√ \$55 Filing Fee & Certified Copy	

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:	FR/Cal Harvest Creek, LLC	
2. (a) Principal office address of limited liability compa	any: c/o CB Richard Ellis Investors LLC	
(Note: MUST BE STREET ADDRESS)	515 South Flower Street, Suite 3100 Los Angeles, CA 90071	
(b) Mailing address of limited liability company:	c/o CB Richard Ellis Investors LLC	
(Note: MAY BE POST OFFICE BOX)	515 South Flower Street, Suite 3100 Los Angeles, CA 90071 M07000000460 4. Document number	
January 24, 2007	M0700000460	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown o		
Registered Agent:	Corporation Service Company	
Registered Office Address:	1201 Hays Street Tallahassee, FL 32301	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	EW Registered Office address: CT Corporation System 1200 South Pine Island Road	
(MUST BE FLORIDA STREET ADDRESS)	c/o CT Corporation System Plantation ,FL 33324	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.		
Signature of a member or authorized representative of a member		
See attached signature page Printed or typed name of signoc		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the plant I am familiar with and accept the obligations of my planter 608, F.S. Or, if this document is being filed to maddress. I hereby confirm that the limited liability compared to the confirmation of Registered Agent Robecca E	erreteny	

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

SIGNATURE PAGE

FLORIDA STATEMENT of CHANGE of REGISTERED OFFICE or REGISTERED AGENT

Sole Member:

FirstCal Industrial, LLC,

a Delaware limited liability company

By: California State Teachers' Retirement System,

a public entity, its Manager

Name:

Christopher J. Allman Chief Investment Officer