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| PICK-UP WAIT MAIL | | |
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| (Business Entity Name) | | |
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| Certified Copies Certificates of Status | | |
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| Special Instructions to Filing Officer: | | |
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Office Use Only



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2009 MAY -6 AMII: 20 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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EXAMINE

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.

| TA DSD 211C | |
|---|---|
| 1. Name of the limited liability company: <u>EA-BSB 2 LLC</u> | |
| (a) Principal office address of limited liability company (<u>Note: MUST BE STREET ADDRESS</u>) | |
| | |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | HASSEE F |
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| | TATE ORIG |
| 03/01/2007 | M07000001229 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Registered Agent and Registered Office shown on t | he records of the Florida Dept. of State: |
| Registered Agent: | Corporation Service Company |
| Registered Office Address: | 1201 Hayes Street |
| | Tallahassee, FL 32301 |
| | |
| (b) Enter name of NEW Registered Agent and/or NEV | V Registered Office address: |
| <u>NEW</u> Registered Agent: | NRAI Services, Inc. |
| | 2731 Executive Park Drive |
| (MUST BE FLORIDA STREET ADDRESS) | <u>Suite 4</u> Weston |
| | |
| If the limited liability company is not organized under the limited that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the can hereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company. | t address of the registered office and the business |
| (Signature of a member or authorized representative of a member) | |
| Charles M. Handy-Manager (Printed or typed name of signee) | _ |
| | and to get in this compaits. I finished going to |
| I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prounding manifer with and accept the obligations of my position F.S. Of, if this document is being filed to merely reflect a confirm that the limited liability company has been notified to MRAI Services Inc. (Signature of Registered Agent) Notice Nagel-Assistant Secretary | gree to act in this capacity. I further agree to sper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change. |
| Signature of Registered Agent Norine Nagel-Assistant Secretary | |

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