

Electronic Filing Cover Sheet

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(((H080000719093)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name

: Florida Research & Filing Services, Inc. .

Account Number : 120030000083

Fax Number

: (850)656-6446

: (850)942-6446



REGISTERED AGENT CHANGE

PBP LAKE SUSANNAH APARTMENT LAND, LLC

Certificate of Status	0
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Estimated Charge	\$35.00

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Corporate Filing Menu

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Florida Research & Filing 850-942-6446

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H08000071909 STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections of liability company submits the following st agent, or both, in the State of Florida.	08.416 or 608.508, Riorida Statutes, the undersigned limited atoment in order to change its registered office or registered
1. The name of the limited Hability compa	rry is: PBP Lake Susannah Apartment Land, LLC
2. The mailing address of the limited liabil	lity company is : 301 South College Street, 10th Floor
Charlotte, NC 28288	
	MATAGARALION
3. Date of filing/registration in Florida	4. Document number
5. Date of humbries stration in Process	T, Location number
The name of the registered agent and the Florida Department of State:	registered office address as shown on the records of the
CORPORATION	SERVICE COMPANY
400d Norm Street	Name
1201 Hays Street	Address
Tellahassa, FL S	32301-2525
	City, State and Zip
6. The name and address of the new registor	City, State and Zip and agent and/or office: Name
NRAI Services, Inc	· · · · · · · · · · · · · · · · · · ·
Man Call Model Inc	Name
2731 Executive Pa	ark Drive, Sulte 4
Florida street ad	idress (P.O. Box NOT acceptable)
Weston	FL 33331
C	ity, State and Zip
confirmed that after the change or changes and the business office of the registered age liability company, it is hereby confirmed the	
Sherry W. Cohen, Corporate Secretary (Printed or typed name of signse)	
	red agent and agree to act in this capacity. I further agree to lative to the proper and complete performance of my duties, alons of my position as registered agent as provided for in this filed to interely reflect a change in the registered office ability company has been notified in writing of this change.
(Signature of Registered Agent)	
	s, P.O. Box 6327, Tallahassee, FL 32314 LING FEE: \$25.08
TNHS18 (8/05)	¥30900971000

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