Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE AHB APARTMENTS LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

T. HAMPTON

MAY 17 2010

EXAMINER

5/14/2010

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.

Name of the limited liability company:	AHB APARTMENTS LLC	
2. (a) Principal office address of limited liability compan	y: 2001 BRYAN ST., STE. 3250	
(Note: MUST BE STREET ADDRESS)	DALLAS TX 75201	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)		
10/24/2007	M0700006360	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
Registered Agent:	CORPORATION SERVICE COMPANY	
Registered Office Address:	1201 HAYS STREET, TALLAHASSEE/FL/32301-2525	
	1/100/Htm (43002) 10/2001-2029	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent</u> : <u>CT Corporation System</u>		
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road	
	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. Multiply Signature of a member organization of a member		
Maria Ozucta Printed or typed name of signer	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the product of the product o	gree to act in this capacity. I further agree to per and complete performance of my duties, lition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.	

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

INHS18 (05/08)

C T Corporation System
Signature of Registered Agent