M0700000 7235

(Requestor's Name)		
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
<u></u>	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
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SECRETARY OF STATE
ANASSEEVELORIDA



April 26, 2010

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: *see list below*

Dear Sir or Madam:

On behalf of the above-referenced entitys, enclosed please find the following for filing with the Florida Secretary of State:

1. One original (1) and one (1) copy of Change of Registered Agent/Address form for each of the entities;

Brush Creek Investments, LLC	M07000007235
CF Acquisition Company M/T, LLC	L07000099183
DM Property Investments, LLC	M07000007289
Orlando Center of Commerce PDC, LLC	L08000071263
Orlando Center of Commerce, LLC	L08000071267
Panattoni Investments, LLC	M05000004127
Pinebrooke Tampa PDC, LLC	L05000097308
Southern Palms Associates PDC, LLC	L07000123657
Southern Palms Associates, LLC	M07000007214
Tampa Crossroads PDC, LLC	L06000003801
Thomas Properties DE, LLC	M07000007277
Thurman Investments, LLC	M05000004035

2. \$300.00 to cover the required filing fee for all 12 entities

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

REGISTERED AGENT SOLUTIONS, INC.

Art Flores

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: BRUS	SH CREEK INVESTMENTS, LLC
2. (a) Principal office address of limited liability compa	
(Note: MUST BE STREET ADDRESS)	SUITE 670 NASHVILLE TN 37203
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	same as above
12/13/2007	M07000007235
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	PEEK, SCOTT
Registered Office Address:	1705 N 16TH STREET TAMPA FL 33605 US
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	
NEW Registered Agent:	REGISTERED AGENT SOLUTIONS, INC.
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 OFFICE PLAZA DRIVE SUITE A
1	TALLAHASSEE ,FL32301
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 ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office
CARL A. PANATTONI 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 compa	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office any has been notified in writing of this change.

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

Signature of Registered Agent SEAN PREWITT, ASST. SECRETARY