2010 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Mar 20, 2010
Secretary of State

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Entity Name: G&E HEALTHCARE REIT VISTA PROFESSIONAL CENTER, LLC

Current Principal Place of Business:

1551 NORTH TUSTIN AVE., SUITE 200
SANTA ANA, CA 92605

New Principal Place of Business:

16427 N SCOTTSDALE RD
SUITE 440
SCOTTSDALE, AZ 85254

Current Mailing Address:

1551 NORTH TUSTIN AVE., SUITE 200
SANTA ANA, CA 92605

New Mailing Address:

16427 N SCOTTSDALE RD
SUITE 440
SCOTTSDALE, AZ 85254

FEI Number: 26-2139827 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KELLIE PRUITT

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HEALTHCARE TRUST OF AMERICA HOLDINGS LP
Address: 16427 N SCOTTSDALE RD, SUITE 440
City-St-Zip: SCOTTSDALE , AZ 85254

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: KELLIE PRUITT TREA 03/20/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date