Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC

Account Number : 120020000094

Phone : (770)777-2091 Fax Number : (770)220-1943

## REGISTERED AGENT CHANGE

## FIRST STATES INVESTORS DB I SP GP, LLC

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## 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. I. Name of the limited liability company: FIRST STATES INVESTORS DB I SP GP, LLC 2. (a) Principal office address of limited liability company: 420 Lexington Ave 19th Floor (Note: MUST BE STREET ADDRESS) New York, NY 10170 (b) Mailing address of limited liability company: 680 Old York Road (Note: MAY BE POST OFFICE BOX) <u>Jenkintown, PA 19046</u> 03/18/2008 M08000001286 Date of filing/registration in Florida Document number (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 32301-0525 US ~~~ (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>: **NEW** Registered Agent: NRAI Services, Inc. + **NEW** Registered Office Address: 2731 Executive Park Drive, Suite 4 <u>(MUST BE FLORIDA STREET ADDRESS)</u> .FL 33331 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. /s/Edward J. Matey Jr. (Signature of a member or authorized representative of a member) Edward J. Matey Jr., V.P. (Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company 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)

(Signature of Registered Agent)
Jennifer Malik, Assistant Secretary