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LLC REGISTERED AGENT CHANGE NNN EXCHANGE SOUTH 11, LLC

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J. SAULSBERRY EXAMINER

AUG 14 2013

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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.

1. Na	me of the limited liability company: NNN Exchange	South 11, LLC					
2. (a)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 750 B Street Suite 1220					
		San Diego, CA 92101			_		
(b)	Mailing address of limited liability company:	750 B Street		201			
	(Note: MAY BE POST OFFICE BOX)	Suite 1220	<u> </u>	دن	·.		
		San Diego, CA 92101		- 5 -			
4/10/2	008	M08000001751		ယ်	,		
3. Da	ate of filing/registration in Florida	4. Document number	J. 13	=	[1		
5. (a	Registered Agent and Registered Office shown of	on the records of the Florida	Dept. of S		***		
	Registered Agent:	NRA1 Services, Inc.		22			
	Registered Office Address:	1200 South Pine Island Rose	d				
	_	Plantation, FL 33324					
	NEW Registered Agent: NEW Registered Office Address:	C T Corporation System 1200 South Pine Island Road					
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)						
		Plantation	,rL,	33324	—		
confinant the man	limited liability company is not organized under the med that after the change or changes are made, the business office of the registered agent will be id ity company, it is hereby confirmed that the change embers of the limited liability company or as other peraing agreement of the limited liability company or the peraing agreement of the limited liability company or the liability company or the liability company or the liab	e Florida street address of the entical. Or, in the case of a e(s) was/were authorized by	e registere Florida lin an affirma	d office nited tive vo	te of		
Caroli	ina Botero						
	for typed name of signee						
I hero comp and I Chap addre By:	eby accept the appointment as registered agent an ly with the provisions of all statutes relative to the am familiar with and accept the obligations of my ter 608, F.S. Or, if this document is being filed to ess, I hereby confirm that the limited liability comp	d agree to act in this capaci proper and complete perfor position as registered agen merely reflect a change in th any has been notified in wri James M. Halpin	ty. I furthe mance of t as provid ne register ting of this	er agre ny duti led for i ed offic chang	e 10 es, in :e e.		
Signat	ure of Registered Agent	Assistant Secretary					
	Division of Corporations, P.O. Box	6327, Tallahassee, FL 323	314				

FILING FEE: \$25.00

INHS18 (05/08)