## M09000002786

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J. BRYAN

MAY 31 2012

EVANINER



CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE : 221861

7490443

AUTHORIZATION :

COST LIMIT :

ORDER DATE: May 30, 2012

ORDER TIME : 3:04 PM

ORDER NO. : 221861-010

CUSTOMER NO: 7490443

## CHANGE OF AGENT

NAME: LCP SLJV 2009-1 FL-1, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

## 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: LCP SLJV 200	9-1 FL-1, L.L.C.	
	: 399 Park Ave., 18th Floor LCP Strategic Loan Joint Venture 20089-1 New York, NY 10022	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	399 Park Ave., 18th Floor  LCP Strategic Loan Joint Venture 20089-1  New York, NY 10022	
July 17, 2009	M09000002786	
3. Date of filing/registration in Florida	. Document number	
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State;	
Registered Agent:	C T Corporation System	
Registered Office Address:	C T Corporation System  1200 South Pine Island Road  Plentation FL 32324	
	Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	V Registered Office address:	
NEW Registered Agent:	Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
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.  (Signature of a member of authorized representative of a member)		
(Printed or typed name of signee)  I hereby accept the appointment as registered agent and agent age	ree to gct in this capacity. I further agree to	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the proving am familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a change of the confirm that the limited liability company has been notified By:  By:   AMY  (Signature of Registered Agent) Corporation Service Company	ver and complete performance of my duties, and I is registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.  SSF Secretary	

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