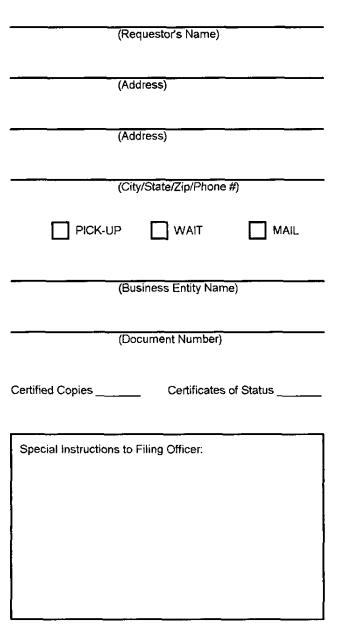
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Office Use Only



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2013 SEP 13 PH 1: 00

B. BOSTICK
SEP 16 2013
EXAMINER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: September 11, 2013

Order#: 784856-214

Re: LRA GP LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Vera M. Norris

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

2013 SEP 13 PM 1: C

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. Nar	me of the limited liability company: LRA GP LLC	,		
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	One Penn Plaza, Suite 4015 New York, NY 10119		
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	One Penn Plaza, Suite 4015 New York, NY 10119		
02/08/2	2010	M10000000618		
		4. Document number		
5. (a)	Registered Agent and Registered Office shown on t	he records of the Florida Dept	. of State:	
	Registered Agent:	CT Corporation System =	72	
	Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	138	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:	- 22	4
	NEW Registered Agent:	Corporation Service Company		
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street		
	1	Tallahassee	,FL 32301	1
confirmand the liability the me the ope	imited liability company is not organized under the land that after the change or changes are made, the Fle business office of the registered agent will be identify company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the regical. Or, in the case of a Floric was/were authorized by an aff	stered offi la limited firmative v	vote of
	Priebe, Authorized Person or typed name of signee	-		
I herei comply and I a Chapte addres	by accept the appointment as registered agent and a with the provisions of all statules relative to the pro im familiar with and accept the obligations of my pos er 608, F.S. Or, if this document is being filed to men s, I hereby confirm that the limited liability company	gree to act in this capacity. If per and complete performanc lition as registered agent as pi rely reflect a change in the reg has been notified in writing o	further ag e of my di rovided fo gistered of If this chal	ree to ities, r in fice nge.
	Ynac, 2-Kuby e of Registered Agent Corporation Service Company	Grace E. Kirby, Assistant VP		

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