M11000000598

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

B. KOHR
SEP 21 2011

EXAMINER



700212028517

09/21/11--01017--019 **25.00

SUFFICIENCY OF FILING

DIVISION OF 21 PH 3: 0:

SECRETARY OF STATE CORPORATIONS

11 SEP 21 PH 3-20

CORPDINGE AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

CONTACT: RICKY SOTO DATE: 09/21/2011 **REF. #:** 000380.154490 CORP. NAME: ORANGE BOWL EASTERN III, L.L.C. () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () TRADEMARK/SERVICE MARK () FICTITIOUS NAME () ANNUAL REPORT () LIMITED LIABILITY () FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () WITHDRAWAL () REINSTATEMENT () MERGER () CERTIFICATE OF CANCELLATION (XX) OTHER: CHANGE OF AGENT FILING

STATE FEES PREPAID WITH CHECK# 541554 FOR \$ 25.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

______ COST LIMIT: \$_____

PLEASE RETURN:

() CERTIFIED COPY	() CERTIFICATE OF GOOD STANDING	(XX) PLAIN STAMPED COP

() CERTIFICATE OF STATUS

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 liability company submits the following statement is agent, or both, in the State of Florida.	608.508, Florida Statutes, the undersigned limited n order to change its registered office or registered				
1. Name of the limited liability company:	Orange Bowl Eastern III, L.L.C.				
2. (a) Principal office address of limited liability co	ncipal office address of limited liability company:				
(Note: MUST BE STREET ADDRESS)	65 East 55th Street, 30th Floor New York, NY 10022				
(b) Mailing address of limited liability company					
(Note: MAY BE POST OFFICE BOX)	65 East 55th Street, 30th Fooor New York, NY, 10022				
2/7/2011	M1100000598				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office sho	wn on the records of the Florida Dept. of State:				
Registered Agent:	National Corporate Research, Ltd.				
Registered Office Address:	515 East Park Avenue Tallahassee, FL 32301				
(b) Enter name of <u>NEW Registered Agent</u> and/ <u>NEW</u> Registered Agent:	or NEW Registered Office address: NRAI Services, Inc.				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES.	S) 515 East Park Avenue Tallahassee ,FL32301				
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the ch of the members of the limited liability company or a or the operating agreement of the limited liability of	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote				
Signature of a member or authorized representative of a member	——————————————————————————————————————				
Printed or typed name of signee					
	at and agree to act in this capacity. I further agree to the proper and complete performance of my duties, if my position as registered agent as provided for in different to the tension of the registered office ompany has been notified in writing of this change.				

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