

M11000005102

| (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 | | | |



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Office Use Only

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ACCOUNT NO. : I2000000195

REFERENCE: 970294 4360443

AUTHORIZATION C

COST LIMIT

ORDER DATE: November 6, 2011

ORDER TIME : 11:22 AM

ORDER NO. : 970294-255

CUSTOMER NO: 4360443

CHANGE OF AGENT

NAME: BRE MARINER BAY POINT LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

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. Nai | me of the limited liability company: BRE MARINE | R BAY POINT LLC | |
|----------------------------------|---|--|--|
| 2. (a) | Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) | 345 PARK AVENUE NEW YORK, NY 10154 | |
| (b) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | 345 PARK AVENUE NEW YORK, NY 10154 | |
| ОСТ | OBER 12, 2011 | M11000005102 | |
| 3. Dat | te of filing/registration in Florida | 1. Document number | |
| 5. (a) | Registered Agent and Registered Office shown on the records of the Florida Dept. of State: | | |
| | Registered Agent: | NRAI SERVICES, INC. | |
| | Registered Office Address: | 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 | |
| (0) | (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent: | Corporation Service Company | |
| | NEW Registered Office Address: | 1201 Hays Street | |
| (MUST BE FLORIDA STREET ADDRESS) | | Tallahassee ,FL 32301 | |
| office hereby liabilit | limited liability company is not organized under the leter the change or changes are made, the Florida street of the registered agent will be identical. Or, in the cay confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company. | se of a Florida limited liability company, it is y an affirmative vote of the members of the limited | |
| (Signatu | re of a member or authorized representative of a member) | • | |
| (Printed | n Sidgel for typed name of signee) | - | |
| BV: . | by accept the appointment as registered agent and as with the provisions of all statutes relative to the provision with and accept the obligations of my position for, if this document is being filed to merely reflect a comman that the limited limbility company has been notified as its agent | gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608 hange in the registered office address, I hereby in writing of this change. | |
| (Signati | re or Registered Agent) Corporation Service Company | • | |

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