

11000005105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

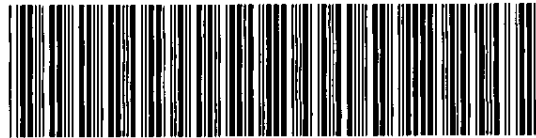
(Document Number)

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B. KOHR
DEC 12 2011
EXAMINER



000214723860

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLahassee, FL 32310

11 DEC 12 AM 10:44

RECEIVED

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 12 PM 12:35



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 970294 4360443

AUTHORIZATION

COST LIMIT : \$ 25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 DEC 12 PM 12:35

ORDER DATE : November 6, 2011

ORDER TIME : 11:21 AM

ORDER NO. : 970294-240

CUSTOMER NO: 4360443

CHANGE OF AGENT

NAME: BRE MARINER CONWAY CROSSING
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. Name of the limited liability company: BRE MARINER CONWAY CROSSING LLC

2. (a) Principal office address of limited liability company: 345 PARK AVENUE
NEW YORK, NY 10154
(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company: 345 PARK AVENUE
NEW YORK, NY 10154
(Note: **MAY BE POST OFFICE BOX**)

OCTOBER 12, 2011

3. Date of filing/registration in Florida

M11000005105

4. 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

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

(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 or authorized representative of a member)

Steven Siegel

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By:

(Signature of Registered Agent) Troy Todd
as its agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

FILED STATE
SECRETARY OF CORPORATIONS
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