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## LLC REGISTERED AGENT CHANGE TRAMMELL CROW COMPANY, LLC

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Electronic Filing Menu

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Help

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

From: James Tanks

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

2. (a)	2121 North Pearl Street	(h)	(b) 2121 North Pearl Street			
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company:  **CNote: MAY BE POST OFFICE BON**  Suite 300  Dallas, TX 75201			
	Suite 300					
	Dallas, TX 75201					
	01/27/2012	N112000000525				
<b>3.</b>	Date of filing/registration in Florida	4.	Document number			
. (a)						
	Registered Agent and Registered Office shown on the records of CORPORATION SERVICE COMPANY	f the Florida D				
	Registered Office Address (MUST BE FLORIDA STREET	202				
	1201 HAYS STREET		SE			
	TALLAHASSEE	. 32301	2025 SEP -5 PM 4: 12			
	P	l.,				
(h)						
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office addre	55:			
	C T Corporation System					
	NEW Registered Office Address:					
	1200 South Pinc Island Road					
	Plantation F	33324				
he cha: gont w vas/we	mited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ws of the St f the registe iability com of the limite	red office and the business office of the registere pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in			
	/s/Talia Reed	Talia R	ced			
Signat	ure of a member or authorized representative of a member		Printed or typed name of signee			
herek rovisie he obli	oy accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide fly reflect a change in the registered office address, I	ree to act in e performan ed for in Chi	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and acce- apter 605, F.S. Or, if this document is being file			

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

By: SEAN L. EMERICK, ASSISTANT SECRETARY
Signature of Registered Agent