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UB III (BROWARD) LESSEE, LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY 15 MAR 12 AM 8: 06

Pursuant to the provisions of sections 605.0114, Florida Statutes the undersigned limited liability company submits the following statement in order to change its registered office of registered agent, or both, in the State of Florida.

1. Name of the limited liability company: UB III (BROV	VARD) LESSEE, LLC	
2. (a) Principal office address of limited liability company	9450 W. Bryn Mawr Suite 750	
(Note: MUST BE STREET ADDRESS)	Rosemont, IL 60018	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
June 17, 2013	M13000003835	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:	
Registered Agent:	Corporation Service Company	
Registered Office Address:	1201 Hays Street 1201 Hays Street Tallahassee, FL 32301-2525	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:	
NEW Registered Agent:	National Corporate Research, Ltd., Inc.	
NEW Registered Office Address:	155 Office Plaza Drive	
(MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Drive Tallahassee FL 32301	
If the limited liability company is not organized under the loonfirmed that after the change or changes are made, the Fland the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwish operating agreement of the limited liability company. The limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited	
Robert Vanecko		
Printed or typed name of signee	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pround I am familiar with and accept the obligations of my po. Chapter 605, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.	
Signature of Registered Agent Mark Thomas Assistant Secreta		
Mark Thomas Assistant Secreta	·V	

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

INHS18 (12/13)