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EXAMINER



600156374106

DEPART OF STATE DIVISION OF CORPORATIONS TALL AHASSEE, FLORIDA

RECEIVED

O9 MAY 28 AM 10: 15
SECRETARY OF STATE
NALLAHASSEE, FLORIDA

B. KOHR

May : 9 ming

EXAMINER



CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE : 999615

7288091

AUTHORIZATION :

COST LIMIT :

ORDER DATE: May 19, 2009

ORDER TIME : 11:14 AM

ORDER NO. : 999615-171

CUSTOMER NO: 7288091

CHANGE OF AGENT

NAME: 485 PROPERTIES, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

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: 485 PROPER	TIES, LLC
2. (a) Principal office address of limited liability compan (<i>Note: MUST BE STREET ADDRESS</i>)	y: 730 Third Avenue, 8th Floor New York, NY 10017
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	THE PER PER PER PER PER PER PER PER PER PE
02/09/1998	M98000000115
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	C T Corporation System
Registered Office Address:	1200 South Pine Island Road
	Plantation, FL 33324
·	
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
	Tallahassee ,FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles climited liability company.	laws of the State of Florida, it is hereby confirmed et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the
(Signature of a member or authorized representative of a member)	_
Maureen Cullen, Authorized Person (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 pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notifie Corporation Service Company	agree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.
(Signature of Registered Agent) Elizabeth A. Dawson, Asst. Vice President	
Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)