## M99000000231

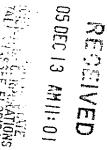
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(Business Entity Name)
(Document Number)
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ACCOUNT NO. : 072100000032

REFERENCE: 748056

7462982

1 ED 2:06

AUTHORIZATION

COST LIMIT : \$ 25.0

ORDER DATE: December 9, 2005

ORDER TIME : 9:49 AM

ORDER NO. : 748056-115

CUSTOMER NO: 7462982

CHANGE OF AGENT

NAME: SCANNELL PROPERTIES #15, 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. The name of the limited	i liability company is	: SCANNELL	PROPERTIES #15, L	LC	
2. The mailing address of	the limited liability of	company is : _	11711 N. Pennsylvani	a Street, Suite 100	
Carmel, IN 46032			·		
February 18, 1000		.,,	M00000000221		
February 18, 1999			M99000000231		
3. Date of filing/registrati	on in Florida		4. Document num	nber	
5. The name of the registe Florida Department of S		istered office	address as shown o		
	СТС	Corporation Syste	em		
Name					
1200 South Pine Island Road					
Address					
Plantation, FL 33324					
	City	, State and Zi	p		
C T Corporation System  Name  1200 South Pine Island Road  Address  Plantation, FL 33324  City, State and Zip  6. The name and address of the new registered agent and/or office:  Corporation Service Company					
Corporation Service Company					
Name					
1201 Hays Street					
Florida street address (P.O. Box NOT acceptable)					
	Tallahassee	FL	32301		
	City,	State and Zip			
If the limited liability come confirmed that after the chand the business office of liability company, it is her of the members of the limit or the operating agreement (Signature of member or authority).	tange or changes are the registered agent very confirmed that the little diability compant of the limited liability.	made, the Flor will be identicate change(s) was otherway by or as otherway of the company.	rida street address al. Or, in the case was/were authorized	of the registered office of a Florida limited d by an affirmative vote	
Maureen Cullen, Attorney in F	act				
(Printed or typed name of signee)					
I hereby accept the appoint comply with the provision, and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered s of all statutes relati l accept the obligatio his document is being that the limited liabil	agent and agr ve to the prop vns of my posit of filed to mere lity company h	ree to act in this ca er and complete pe tion as registered a ly reflect a change has been notified in	pacity. I further agree to prformance of my duties, gent as provided for in in the registered office writing of this change.	
(Signature of Registered Agent)	Clinabath A Dayson And	t Vice President		=	
· · · · · · · · · · · · · · · · · · ·	nizabeth A. Dawson, Ass	a. vice president	L		

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