n99000001969



ACCOUNT NO.

072100000032

REFERENCE

583716

7336996

AUTHORIZATIÓN

COST LIMIT

ORDER DATE : May 16, 2002

ORDER TIME :

2:42 PM

ORDER NO. : 583716-015

CUSTOMER NO:

7336996

700007086967--5

ER David Krull, Esq
Pinnacle Realty Management
Suite 200
2002801 Alaskan Way

Seattle, WA 98121

CHANGE OF AGENT

NAME:

102 WEST WHITING LLC

| Name Availability PLEASE | RETU. | RN TH | E FOL | LOWING | AS | PROOF | OF | FILING: |
|-----------------------------|--------------|-------|----------------|---------|-----|-------|----|---------|
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| Acknowledgement | DCC | | | | | | | |
| W. P. Verifyer | DCC | | | | | | | |

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 liability company is: 102 WEST W | HITING LLC | | | | |
|--|---|---|--|--|--|
| 2. The mailing address of the limited liability company is: | | | | | |
| Suite 200, 2801 Alaskan Way, Seattle, WA 98121 | | | | | |
| 12/13/1999 | М99000001969 | 02 TAL | | | |
| 3. Date of filing/registration in Florida | 4. Document number | | | | |
| 5. The name of the registered agent and the registered office at Florida Department of State: | idress as shown on the reco | >> _ 게 | | | |
| C T Corporation Sys | stem | | | | |
| Name | | 1:32 STATE FLORID | | | |
| 1200 South Pine Islan Address | d Road | DE 2 | | | |
| Plantation, FL 333 | 324 | | | | |
| City, State and Zip | | | | | |
| 6. The name and address of the new registered agent and/or of | fice: | | | | |
| Corporation Service Co | ompany | | | | |
| Name | | | | | |
| 1201 Hays Street | | | | | |
| Florida street address (P.O. Box N | OT acceptable) | | | | |
| Tallahassee FL | 32301 | | | | |
| City, State and Zip | | | | | |
| If the limited liability company is not organized under the law confirmed that after the change or changes are made, the Flori and the business office of the registered agent will be identical liability company, it is hereby confirmed that the change(s) was the members of the limited liability company or as otherwise the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) | da street address of the regi l. Or, in the case of a Florid as/were authorized by an aff | stered office la limited firmative vote of | | | |
| Laura R. Dunlap, Authorized Representative (Printed or typed name of signee) | | | | | |
| I hereby accept the appointment as registered agent and agree comply with the provisions of all statutes relative to the proper and I am familiar with and accept the obligations of my position Chapter 608, F.S. Or, if this document is being filed to mereladdress, I hereby confirm that the limited liability company has | e to act in this capacity. I f r and complete performanc on as registered agent as pi y reflect a change in the reg as been notified in writing c | further agree to e of my duties, rovided for in sistered office of this change. | | | |
| Cynthia L. Harris (Signature of Registered Agent) Cynthia L. Harris as its agent | | | | | |

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

FILING FEE: \$25.00

INHS18(10/99)