

LO6000122618

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H07000001744 3)))



H070000017443ABCK

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
 Division of Corporations
 Fax Number : (850)205-0380

From:
 Account Name : GREENBERG, TRAURIG, HOFFMAN, ET AL.
 Account Number : 076077001461
 Phone : (305)789-5357
 Fax Number : (305)961-5357

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 JAN -3 AM 8:47

FILED

REGISTERED AGENT CHANGE

3900 BISCAYNE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

RECEIVED

07 JAN -3 AM 8:00

Division of State Operations

Electronic Filing Menu

Corporate Filing Menu

Help

B07000001744 3

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: 3900 Biscayne, LLC
- 2. The mailing address of the limited liability company is: 2915 Biscayne Boulevard, Suite 200, Miami, Florida 33137

3. Date of filing/registration in Florida: 12/27/08
 4. Document number: L06000122818

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Kaufman, Cheryl J
 Name
2601 S. Bayshore Drive, Suite 250
 Address
Coconut Grove, FL 33193
 City, State and Zip

6. The name and address of the new registered agent and/or office:

Nancy Karp
 Name
2915 Biscayne Blvd., Suite 200
 Florida street address (P.O. Box NOT acceptable)
Miami FL 33137
 City, State and Zip

FILED
 07 JAN -3 AM 8:47
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

Nancy Karp, Authorized Representative
(Printed or typed name of signer)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to this position and to maintain the presence of my office and files in the State of Florida and to accept responsibility for the proper filing of all documents with the Department of State.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6317, Tallahassee, FL 32314
FILING FEE: \$25.00

DHS16 (8/05)

B070000017443