

F03000005567

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 APR 18 PM 4:06

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@ 4. 14



CORPORATION SERVICE COMPANY

CSC - WILMINGTON  
Suite 400  
2711 Centerville Road  
Wilmington De 19808  
800-927-9800  
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: March 28, 2014

Order#: 072704-285

Re: FLORIDA LESSOR-MEADOWVIEW, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Evelyn Wright  
c/o Corporation Service Company  
2711 Centerville Road, Suite 400  
Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

APR 18 2014

Division of Corporations  
State of Florida

April 7, 2014

CORPORATION SERVICE COMPANY  
% EVELYN WRIGHT  
2711 CENTERVILLE ROAD - STE. 400  
WILMINGTON, DE 19808

SUBJECT: FLORIDA LESSOR-MEADOWVIEW, INC.  
Ref. Number: F03000005567

We have received your document for FLORIDA LESSOR-MEADOWVIEW, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file your document is \$35.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 114A00007362

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Maryland in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FLORIDA LESSOR-MEADOWVIEW, INC.

2. The principal office address: 200 International Circle #3500, Hunt Valley, MD 21030

3. The mailing address (if different):

4. Date of incorporation/qualification: 11/07/2003 Document number: F03000005567

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301
P.O. Box NOT acceptable

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

Dona Priebe, Vice President
Printed or typed name and title

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company
By: [Signature]
Signature of Registered Agent

03/26/2014
Date

If signing on behalf of an entity:
Elizabeth A. Dawson, Asst. Vice President
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*