MO2000000715

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
3				





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10/05/16--01011--007 **25.00

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D. BRUCE OCT 08 2016



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

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To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: October 3, 2016

Order#: 296684-237

Re: CMCP-ISLAND LAKE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Mary Rivers

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

	ame of the limited liability company: CMCP-ISLANI			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) _	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	BRENTWOOD, TN 37027			
	03/20/2002	N	102000000715	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	C T CORPORATION SYSTEM			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	1200 SOUTH PINE ISLAND ROAD			
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)		
	PLANTATION , F	L 33324	ZOIS OCT	
(b)	Corporation Service Company		5	
` ,	Enter name of NEW Registered Agent and/or NEW Registere	ed Office addres	25: SE 25 25 25 25 25 25 25 25 25 25 25 25 25	
	1201 Hays Street		TO Lit	
	NEW Registered Office Address:			
	Tallahassee F	ւլ 32301		
the cha agent was/w the art	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited if ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the Sta of the register liability comp of the limited liability comp	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in a company. In Authorized Person	
_	ature of a member or authorized representative of a member		Printed or typed name of signee	
provis the ob to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, and in writing of this change. The of Registered Agent Corporation Service Company	le performand led for in Cha I hereby conf	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept the following the control of the control	
	Division of Corporations P.O.		•	