M0600000462

(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:								





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10/04/16--01037--014 **25.00

2016 OCT -4 PK 4: 47

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K. SALY OCT - 6 2016



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: September 30, 2016

Order#: 296682-019

Re: BLC ATRIUM-JACKSONVILLE, 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.

1.	Na	me of the limited liability company: BLC ATRIUM-JA	ACKSON	IVILLE, LLO	<u>C</u>			
2	(2)	111 WESTWOOD PLACE SUITE 400	(b	`				
۷.	(a) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		BRENTWOOD, TN 37027	_					·
		01/26/2006		М060000	00462			
3.		Date of filing/registration in Florida	4.		Document number	ег		
5.	(a)	C T CORPORATION SYSTEM						
٠.	(4)	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 A	-		2			
						AL.	910	e Marie
-		PLANTATION , FL	33324		-	AHASS	2016 OCT -4	
	(b)	Corporation Service Company				m _S	-	
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	d <u>ress</u> :	_	F 5	725 276	F
						<u> </u>	PH 1: 47	
		1201 Hays Street			_	Ď.		
		NEW Registered Office Address:						
		Tallahaanaa	22201		_			
		Tallahassee , FL	32301		_			
th ag w th	e cha gent v as/we e arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cless of organization or the operating agreement of the turn of a member or authorized representative of a member	the registability confithe limited l	stered offic ompany, it i ited liabilit iability cor	e and the business is hereby confirme ty company or as o	s office or ed that the otherwise	f the re e chang provid	gistered ge(s)
I pi th to no	here ovisi e obl mere otified	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I it inspiriting of this change. The of Registered Agent Corporation Service Company	perform d for in (hereby co	ance of my Chapter 60. Onfirm that	nacity I further a	gree to co familiar w documen ity compa	omply v vith and t is bei ny has	vith the d accept ng filed been
		Division of Cornerations P O 1	20x 6327	7a Tallaha	ssee FL 32314			

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