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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#: 296677-068

Re: AHC SOUTHLAND-LAKELAND, 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: AHC SOUTHLAI	ND-LAK	ELAND, LLC	<u>.</u>	
2. ((a)	111 WESTWOOD PLACE SUITE 400 Principal office address of limited liability company:	_ (b)		lailing address of limited liability company:	
		(Note: MUST BE STREET ADDRESS)		IVI	(Note: MAY BE POST OFFICE BOX)	
			_			
		BRENTWOOD TN37027	_			
_		03/31/2006	=	M0600000		
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 ,FL_	33324		a	
. ,		Comparation Commiss Commiss				
((b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address:			5 0	
		Enter name of MENY Registered Agent and/or MEN Registered	Jiikt auu	1633.		
		1201 Hays Street			1447 1444 - 1	
		NEW Registered Office Address:			Zto	
					32 🛅	
					<u> </u>	
		Tallahassee , FL	32301			
Ifth	ne li	mited liability company is not organized under the law	s of the !	State of Flor	rida, 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						
age	nt w /we	vill be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of	bility con	npany, it is ted liability	hereby confirmed that the change(s)	
		cles of organization or the operating agreement of the l				
		Xie E. Gonie	Jill C	ilmi, Authori	ized Person	
Signature of a member or authorized representative of a member Printed or typed name of signee						
the to n	visie obli iere	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have a change in the registered office address, I have a change in the registered of the change.	e to act performa for in C ereby co	in this capa nce of my d hapter 605, nfirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
Ilrace Cotuble						
Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Assistant Vice President						