## MD8000004930

(Requestor's Name)						
(Ad	ldress)					
(Address)						
(Cit	ty/State/Zip/Phone	#)				
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(Bu	isiness Entity Nam	ne)				
(Document Number)						
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RARDONS.



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#: 072704-052

Re: CHR DELAND WEST 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: 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.

OUCA.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.

I. N	ame of the limited liability company: CHR DELAN	D WES	TLLC		
2. (a)	200 International Circle #3500  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b) <u>200 Inte</u>		ernational Circle #3500  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
	Hunt Valley, MD 21030	<del></del>	Hunt V	alley, MD 21030	
2	11/07/2008  Date of filing/registration in Florida	- , -	M0800	00004930	
<ol> <li>(a)</li> </ol>	C T Corporaton System	4.		Document number	
3. (a,	Registered Agent and Registered Office shown on the records of a 1200 South Pine Island Road  Registered Office Address (MUST BE FLORIDA STREET)			e: -	NAL PER -1
(b)	Plantation , FL  Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered			-	PH 12: 47
	1201 Hays Street  NEW Registered Office Address:			_	
•	Tallahassee, FL	_32301		_	
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regist ability cou of the limi	ered offic npany, it i ted liabilit	e and the business offices s hereby confirmed that by company or as other	ce of the registered at the change(s)
	026			Authorized Person	
I here provis the ob to mer notifie Corpo	alter of a member or authorized representative of a member  by accept the appointment as registered agent and agricions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by the change in the registered office address, I had in writing of this change.  The change of this change.  The change of Registered Agent	ree to act performa d for in C hereby co	in this cap nce of my hapter 602 nfirm that	Printed or typed name of acity. I further agree a duties, and I am familis, F.S. Or, if this docuthe limited liability co.	to comply with the
By: I	Elizabeth A. Dawson, Asst. Vice President Division of Corporations P.O. I	Box 6327	• Tallaha:	ssee, FL 32314	

FILING FEE: \$25.00

INHS18 (2/14)