A47000008875

(Requestor's Name)						
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	= #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
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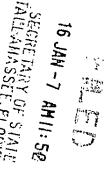


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J SHIVERS



COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	TECT:	Rosemon	t Mano	or Ltd	d.		
		tnership or Lin	nited Liab	ility Lir	mited Partnership		
DOCUMENT NUMBER:			A93000000875				
	nclosed Statement of Change of are submitted for filing.	`Registered	Office as	nd/or l	984-2100x118 time Telephone Number ent of State. ADDRESS: Section Corporations 27		
Please	e return all correspondence conc	Rosemont Manor Ltd. Limited Partnership or Limited Liability Limited Partnership A9300000875 Change of Registered Office and/or Registered Agent and ng. dence concerning this matter to: cit Cliche lact Person ont Manor Ltd. Company Mill Rd. Ste. A-250 Address A, GA 30339 e and Zip Code Challmarkco.com for future annual report notification) occerning this matter, please call: e at 770 984-2100x118 Area Code and Daytime Telephone Number made payable to the Florida Department of State. MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327					
	April Cliche			_			
	Contact Person						
	Rosemont Manor	Ltd.					
	Firm/Company						
	3111 Paces Mill Rd. St	te. A-250					
	Address			_			
	Atlanta, GA 303	39					
	City, State and Zip Co			_			
	acliche@hallma	rken com					
E	-mail address: (to be used for future ar	nnual report no	tification)	l	<u> </u>		
For fu	orther information concerning th	is matter, ple	ease call	•			
	April Cliche	at (770)	984-2100x118		
	Name of Contact Person				ytime Telephone Number		
Enclo	sed is a \$35.00 check made paya	able to the F	lorida D	epartn	nent of State.		
STRE	CET ADDRESS:		MAII	LING	ADDRESS:		
Regist	tration Section		Regis	tratior	n Section		
	on of Corporations						
	n Building						
	Executive Center Circle		Tallal	ıassee	, FL 32314		
Tallah	assee, FL 32301						

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1	Rosemont Manor Ltd.							
	Name of Limited Partnership or Lin	mited Liability L	imited Partners	ship				
2.	08/26/1993	3.	A93000	0000875				
Date of fi			Florida docur	ument number				
4. The name of the Department of Sta	e registered agent and the registered te:	office address a	as shown on the	records of the Florida				
	Susan	Adams						
Name								
	4040 West Newberr	y Road, Suit	te 950B					
	Add							
	Gainesville	, FL 32607						
	City, State	e and Zip						
5. The name and l	Florida street address of the new reg	istered agent and	d/or office:					
	The Hallmark C	ompanies, li	nc.	i				
	Na	me		A CONTRACTOR				
	4040 West Newberr	v Road. Suit	e 950B					
	Florida street address (P							
	Gainesville,	FI	32607	SSI				
	City, State	 '	,	ma R				
6. Such change(s) Signature of General	is/are effective when filed by the Fi	orida Departmen	nt of State.	ECRETARY OF STATE				
comply with the pr	e appointment as registered agent an ovisions of all statutes relative to the with an accept the obligations of my tered Agent	e proper and co	mplete perform	I further agree to ance of my duties,				
Filing Fee:	\$35.00							

Certified Copy (optional): \$52.50