## F030000006037

(Re	equestor's Name)	•
. (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SEGRETARY OF STATE

MSR 1/24/08



<b>€</b> Set the set of th	
ACCOUNT NO. : 07210000032	
REFERENCE : 399261 4370110	
COST LIMIT : \$ 35 00	
COST LIMIT : \$ 35.00	
	•
ORDER DATE : January 13, 2008	
ORDER TIME : 9:56 AM	
ORDER NO. : 399261-445	
CUSTOMER NO: 4370110	
<u>CHANGE OF AGENT</u>	
NAME: CHH TORREY PINES TENANT CORP.	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY	
CONTACT PERSON: Susie Knight	

EXAMINER'S INITIALS:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Delaware
in orde	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: CHH TORREY PINES TENANT CORP.
2. The principal	office address:
420 S. Or	range Avenue, Suite 700, Orlando, FL 32801
_	address (if different):
4. Date of incorp	poration/qualification: 12/05/2003 Document number: F0300006037
	d street address of the current registered agent and registered office on file with the rtment of State:
	Stephanie J. Thomas
	420 S. Orange Avenue, Suite 700
	Orlando, Fl 32801
6. The name and (if changed):	Orlando, Fl 32801  I street address of the new registered agent (if changed) and /or registered office Floring Service Company
	Corporation Service Company
	Corporation Service Company  1201 Hays Street
	(P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
Subratu	David J. Kimichik, President (Printed or typed name and title)
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complete performance  d I am familiar with and accept the obligation of my position as registered agent. Or, if this  ng filed merely to reflect a change in the registered office address, I hereby confirm that the  s been notified in writing of this change.
	tion Service Company
Sig	gnature of Registered (gept) (Date)
If signing on bel	half of an entity:
	ppet, Asst. VP
(T	'yped or Printed Name)
	* * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)