

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nar	me)			
(Do	cument Number))			
Certified Copies	_ Certificate:	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



600265110596

10/16/14--01032--019 **35.00



Ra change



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: October 14, 2014

Order#: 329385-189

Re: SAUL CENTERS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

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: Janis M. Smith c/o Corporation Service

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 CORPORATIONS

statement of cha	provisions of sections 607.0302, 617.0 nge is submitted for a corporation org r to change its registered office or regi	anized under the la	ws of the State of M	D	<u> </u>	
1. The name of t	he corporation: SAUL CENTERS, INC	C .				
2. The principal	office address: 7501 Wisconsin Aven	ue, Suite 1500E, B	ethesda, MD 20814	4		
	ddress (if different):		· · ·			
4. Date of incorporation/qualification: 01/15/2004 Document number: F04000000265						
	street address of the current registered tment of State: (If resigned, enter resigned)		ed office on file with	n the		
	C T Corporation System		_			
	1200 South Pine Island Road					
	Plantation	FL	33324			
6. The name and (if changed):	street address of the new registered a	gent (if changed) ar	nd /or registered offic	ce		
	Corporation Service Company		·			
	1201 Hays Street		· · · · · · · · · · · · · · · · · · ·		7	
	P.O. Box N	OT acceptable FL	32301)CT 6	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
The street addre	ess of its registered office and the stre be identical.	et address of the bu	usiness office of its	registered	l-agent," ⊐:	
	is authorized by resolution duly adopte board or the corporation has been				4:4	~ ·
Signat	of an orticer or director	Dona Priebe, \	/ice President		<u>_</u>	
I further agree a performance of agent. Or, if the hereby confirm	the appointment as registered agent to comply with the provisions of all stary duties, and I am familiar with and is document is being filed merely to that the corporation has been notified in Service Company	tatutes relative to the accept the obligation of the color of the colo	he proper and comp tion of my position o he registered office	as registe:	red I	
By: July	in august	10/13/2014	Duta			
U	nature of Registered Agent half of an entity:		Date			
<i>c c</i>	, Assistant Vice President					
	yped or Printed Name					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *