F04000003896

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Susmess Entity Name)
· (Document Number)
(Document Number)
Cartification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500122617515



O8 APR 24 PH 2: 08
SECRETARY OF STATE
FALL AHASSEE, FLORID

RA. Charge



ACCOUNT NO ACCIONOSO				
ACCOUNT NO. : 072100000032				
REFERENCE : 527039 7454283				
AUTHORIZATION Smell bleman				
COST LIMIT : U\$ 35.00				
ORDER DATE: April 13, 2008				
ORDER TIME : 9:40 AM				
ORDER NO. : 527039-500				
CUSTOMER NO: 7454283				
CHANGE OF AGENT				
NAME: IPC FLORIDA II MANAGEMENT,				
INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
XX PLAIN STAMPED COPY				
CONTACT PERSON: Cindy Harris				
EXAMINER'S INITIALS:				

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

Pursuant to the provisions of sections 607.0502, 617.050 statement of change is submitted for a corporation orga		_	
in order to change its registered office or regis			_
1. The name of the corporation: IPC FLORIDA II	MANAGEMENT, INC.		
2. The principal office address: c/o IPC Real Esta	te Management		
303 North Hurtsborne Parkway, Louisv	ille, KY 40222	<u> </u>	
3. The mailing address (if different):			
4. Date of incorporation/qualification: 07/09/2004	Document number: F04000	0003896	
The name and street address of the current registered a Florida Department of State:	agent and registered office on file with	n the	
C T Corporation System			
1200 S. Pine Island Road			
Plantation, FL 33324		98 SEI	
6. The name and street address of the new registered age (if changed):	ent (if changed) and /or registered offic	08 APR 24 SECRETAR (LLAHASS	
Corporation Service Compan	у	PA PA	T
1201 Hays Street		51.0 ST	
(P.O. Box NOT acceptable	c)	ATE ORID	
Tallahassee, FL 32301		> ′	
The street address of its registered office and the stree as changed will be identical.	t address of the business office of its	registered age	ent,
Such change was authorized by resolution duly adopte authorized by the board, or the corporation has been n	ed by its board of directors or by an o otified in writing of the change.	officer so	
(Signature of an officer or director)	Maureen Cullen, Attorney		_
I hereby accept the appointment as registered agent at I further agree to comply with the provisions of all state of my duties, and I am familiar with and accept the observant is being filed merely to reflect a change in the corporation has been notified in writing of this change. Corporation Service Company	itutes relative to the proper and complication of my position as registered he registered office address, I hereby e.	plete performa lagent. Or, if y confirm that	nce this the
By: Kignature of Registered Agent)	April 8, 2008 (Date)	<u>. </u>	_
If signing on behalf of an entity:			
Elizabeth A. Dawson, Asst. VP			
(Typed or Printed Name)	EE: \$35.00 * * *		
FILING F.	EE, GJJ:UU		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)