Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000084130 3)))



H190000841303ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CAPITOL CORPORATE SERVICES, INC.

Account Number : I20160000048 : (800)345-4647 Phone : (800)432-3622 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

REGISTERED AGENT CHANGE

AMERICAN CAMPUS COMMUNITIES SERVICES, IN

2 PM	
9 HAR 12 See Free	

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H19000084130 3)))

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

statement of ch	provisions of sections 607, ange is submitted for a corp er to change its registered o	poration organize	ed iinde	r the laws of the State	of DELA		₹ E
	the corporation: AMER					VICE	<u>:S, IN</u> C.
	office address: 12700 H	IILL COUNTE	KY BC	DULEVARD STE	1-200,		
	TX 78738						
3. The mailing	address (if different): 127	00 HILL COU	MIR	BOULEVARD S	STE T-200),	
	I, TX 78738						
4. Date of incor	poration/qualification: 4/	5/2006	Do	zument number: FO6	<u> </u>	207	
	d street address of the currentment of State: (If resigner			egistered office on file	e with the		
	C T CORPORATIO	N SYSTEM			_		
	1200 SOUTH PINE	ISLAND RO	AD			20	
	Street Address					2019 MAR	CT'140
	PLANTATION City			33324 zo cooo	— ; · · · ·	AR	
6. The name an (if changed):	d street address of the new		_	·	loffice	12 /	513
	Capitol Corporate S	ervices, Inc.			נה ניי	A	1 4 5
						ف	Sec.
	515 East Park Aver	P.O. Box NOT see	onutable		 ' ". '	56	
	Tallahassee	FL		32301			
~	GN	State	_	The Code			
as changed wil	ess of its registered office be identical.	and the street ad	dress o	the business office o	i ns registere	od agen	.L,
Such change wanthorized by t	as authorized by resolution he board, or the corporation	a duly adopted by in has been notifi					
•	ure of an officer or director			/e Beinke, Vice P			
I hereby accept I further agroc performance of agent. Or, if the hereby confirm	t the appointment as regist to comply with the provisi f my dulies, and I am famil his document is being filed that the corporation has b	ered agent and a ons of all slatute lar with and acc merely to reflect been notified in w	igree to 5 relati ept the t a char vriting	act in this capacity. va to the proper and cooligation of my posit ge in the registered of It this change.	complete tion as regist ffice address	ered , I	
ιDe	lann Case			03/11/2019			
Si	mature of Registered Agent.			Dato			
If signing on be	chalf of an entity:						
	se, Asst. Secretary o	n behalf of C	apitol	Corporate Service	æs, Inc.		
		FILING FEE:	\$35,00	n h #			
M CR2E045 (03/12)	Make checks pa Iail to: Division of Core			ARTMENT OF STATE 127, TAILAHASSEE, F	L 32314		

(((H190000841303)))