F08000001506

Office Use Only



100284620251

16 APR 18 AM 8: 16

SECUL LABORATO SE SUSTEMON STATE ON THE SECUL LABORATORY OF SUSTEMON SECUL SEC

16 APR 18 PM 4:5

RECEIVED

APR 1 9 2016 C LEWIS

CORPORATION SERVICE COMPANY 1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I2000000195						
REFERENCE : 103313 7452534						
AUTHORIZATION: Spellede man						
COST LIMIT : \$ 35.00						
ORDER DATE : April 14, 2016						
ORDER TIME : 3:21 PM						
ORDER NO. : 103313-010						
CUSTOMER NO: 7452534						
CHANGE OF AGENT						
NAME: HCP S-H 2015 MEMBER, INC.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
AA PHAIN STANFED COFT						
CONTACT PERSON: Melissa Zender - EXT. 62956						

EXAMINER'S INITIALS:

COVER LETTER

	Amendment Section Division of Corporations				
SUBJE	HCP S-H 2015 Member, Inc. Name of Corporation				
	·				
DOCU	F08000001506 1ENT NUMBER:				
The enc	osed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please re	eturn all correspondence concerning this matter to the following:				
	Yury Tolentino				
	Name of Contact Person				
	HCP, Inc.				
	Firm/Company				
1920 Main Street, Suite 1200					
	Address				
	Irvine, CA 92614				
	City/State and Zip Code				
ytolentino@hcpi.com					
	E-mail address: (to be used for future annual report notification)				
For furth	er information concerning this matter, please call:				
Yury To	at (
	Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed	is a \$35.00 check made payable to the Department of State.				
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

CR2E045 (03/12)

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

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation orga r to change its registered office or regist	nized under the la	ws of the State of <u>[</u>	Delaware	
	he corporation: HCP S-H 2015 Member	J	•		
2. The principal	office address: 1920 Main Street, Suite	1200, Irvine, Cali	fornia 92614		_
3. The mailing a	ddress (if different):				_
4. Date of incorp	poration/qualification: April 3, 2008	Document	number: F080000	01506	
5. The name and	street address of the current registered attment of State: (If resigned, enter resignation		ed office on file wi	th the	
	Corporation Service Company				
	1200 South Pine Island Road			5	•
	Plantation	FL	33324		
6. The name and (if changed):	street address of the new registered age	nt (if changed) an	d /or registered off	ice ?	
	Corporation Service Company				
	1201 Hays Street				
	P.O. Box NO1 Tallahassee	`acceptable FL	32301		
=	ss of its registered office and the street be identical. s authorized by resolution duly adopted e board, on the corporation has been no				
	Solo W		ng, Executive Vice		
Signatur	e of an officer or director		ed or typed name and title		
agent. Or, ij ini. herebv confirm i	the appointment as registered agent and comply with the provisions of all state my duties, and I am familiar with and a state document is being filed merely to reflicat the corporation has been notified in Service Company	d agree to act in inters relative to the cept the obligated a change in the writing of this c	this capacity. e proper and comp ion of my position ne registered office change.	olete as registered address, I	
By:	ature of Registered Agent	April 14, 2016	Date		
If signing on bel	nalf of an entity: Melissa Ze Asst Vice Pr				
ıy	ped or Printed Name * * * FILING FE				

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