## F08000002366

| ·                                       |
|---|
| (Requestor's Name)                      |
|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| (Business Entity Name)                  |
| (Decument Number)                       |
| (Document Number)                       |
| Continue Continue of Change             |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |
|   |
| Walk In \$35,00                         |

Office Use Only



800329478328

S TALLENT

2019 MAY 15 AM 8: 41
SECRETARY OF STATE

19 HAY 15 PH 4: 12

Alk-CA



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

| Date;(        | 05/15/2019                       |                        |
|---------------|----------------------------------|------------------------|
| Name:         | Merritt Walker                   | _                      |
| Reference #:_ | 1083023                          | <del></del>            |
| Entity Name:  | THE ARLINGT                      | ON OF NAPLES, INC.     |
| ☐ Articles    | s of Incorporation/Authorization | n to Transact Business |
| Amend         | lment                            |                        |
| ✓ Change      | e of Agent                       |                        |
| Reinsta       | atement                          |                        |
| ☐ Conve       | rsion                            |                        |
| ☐ Merger      | •                                |                        |
| ☐ Dissolu     | ution/Withdrawal                 |                        |
| Fictition     | us Name                          |                        |
| Other_        |                                  |                        |
|               |                                  |                        |
| Authorized An | mount:\$35                       |                        |
| Signature:    | MM                               |                        |

P: 800.221.0102

F: 800.944.6607

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

| statement of chai                                    | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Minois rt o change its registered office or registered agent, or both, in the State of Florida.  |   |
|--|--|---|
| 1. The name of th                                    | he corporation: The Arlington of Naples, Inc.  |   |
| 2. The principal.                                    | office address: 3150 Salt Creek Lane   |   |
| 2. The principar                                     | Arlington Heights, IL 60005  |   |
| 3 The mailing a                                      | ddress (if different):same   |   |
|  |  | _ |
| 4. Date of incorp                                    | poration/qualification: 05/27/2008 Document number: F08000002366   | _ |
| 5. The name and                                      | d street address of the current registered agent and registered office on file with the running of State: (If resigned, enter resigned)  |   |
|  | Corporation Service Company  |   |
|  | 1201 Hays Street   |   |
|  | Tallahassee, FL 32301-2525   |   |
| 6. The name and (if changed):                        | Tallahassee, FL 32301-2525  d street address of the new registered agent (if changed) and /or registered office  |   |
|  | Cogency Global Inc.  |   |
|  | 115 North Calhoun Street, Suite 4  | į |
|  | P.O Box 801 acceptance   |   |
|  | Tallahassee, FL 32301  |   |
| The street address changed will                      | ess of its registered office and the street address of the business office of its registered agent, I be identical.  |   |
| Such change was                                      | as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.  |   |
| Man  | Warie Carlson, Secretary Printed or typed name and title   |   |
| l hereby accept<br>l further agree<br>performance of | 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 camplete of my duties, and I am familiar with and accept the obligation of my position as registered his document is being fited merely to reflect a change in the registered office address, I in that the corporation has been notified in writing of this change. |   |
| Jane si  | Market 5/15/2019  Ighature of Registered Agent Date  |   |
| If signing on b                                      | behalf of an entity:   |   |
| Cogency (  | Typed or Printed Name  |   |
| J ,  | * * * FHANG FEE: \$35.00 " * *   |   |

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