LOTODODOGLETOT

| (R | equestor's Name) | | | | | | | |
|---|------------------------|--------|--|--|--|--|--|--|
| (Address) | | | | | | | | |
| A) | ddress) | | | | | | | |
| (C | ity/State/Zip/Phone #) | | | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | | | | |
| (Business Entity Name) | | | | | | | | |
| (Document Number) | | | | | | | | |
| Certified Copies | Certificates of | Status | | | | | | |
| Special Instructions to Filing Officer: | | | | | | | | |
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Office Use Only



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04/28/15--01028--011 **25.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

RAROICH8
05.5.15



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 janis.smith@cscglobal.com

Date: April 24, 2015

Order#: 596876/025

Re: ST. GEORGE HC INVESTMENTS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| 1. | Na | me of the limited liability company: ST. GEORG | SE HO | INVES | TMENTS, | LLC | | |
|-----------------|------------------------|--|------------------------------------|---|--|--|--|--|
| 2. | (a) | 12201 BLUEGRASS PARKWAY | | (b) |) | | | |
| (**) | | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | - (5) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | | |
| | | LOUISVILLE K\\ 40299 | | - | | | | |
| | | 09/21/2007 | | _ | L0700009 | 96709 | | |
| 3. | | Date of filing/registration in Florida | | 4. | | Document number | | |
| 5. | (a) | C T CORPORATION SYSTEM | | | | | | |
| | () | Registered Agent and Registered Office shown on the record | s of th | e Florida | Dept, of State | - e: | | |
| | | 1200 SOUTH PINE ISLAND ROAD | | | | | | |
| | | Registered Office Address (MUST BE FLORIDA STRE | ET AI | DDRESS | ! | - | | |
| | | PLANTATION , | , FL_ | 33324 | | - | 200 | DIVI 3 |
| | (b) | Corporation Service Company | | | | | <u>≥</u> | 1018 1013 1013 |
| | (-) | Enter name of NEW Registered Agent and/or NEW Registered Office address: | | | - | APR 28 | FILE RY RY RY RY RY RY RY RY RY RY RY RY RY | |
| | | 1201 Hays Street | | | | | 2 | 3 9 5 |
| | | NEW Registered Office Address: | | | | - | H 2: 56 | STATE |
| | | Tallahassee | , FL_ | 32301 | | - | | |
| the ag wa | e cha ent was/we | mited liability company is not organized under the nge or changes are made, the Florida street addressill be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the memberles of organization or the operating agreement of | s of the d liab ers of | he regis oility co the lim | tered office mpany, it is ited liabilit | e and the business office of s hereby confirmed that the y company or as otherwise | f the i | registered nge(s) |
| | | ()06 | | Don | a Priebe, A | uthorized Person | | |
| | Signat | · | | | | Printed or typed name of sign | | |
| pr the to | ovisi e obl mere | by accept the appointment as registered agent and cons of all statutes relative to the proper and complications of my position as registered agent as provily reflect a change in the registered office address I in writing of this change. | agre lele p vided s, I hë | e to act erforma for in C ereby co | in this cap ince of my chapter 605 onfirm that | acity. I further agree to c duties, and I am familiar t 5, F.S. Or, if this documen the limited liability compo | omply with a at is be any ha | with the nd accept ging filed as been |
| Si | gnatu | re of Registered Agent Corporation Service Compar | ny | BY: G | race E. Kii | rby, Asst. Vice Presiden | t | |