

DOCUMENT# L09000111355

Entity Name: BURTON CAROL MANAGEMENT FACILITIES FLORIDA, LLC

New Principal Place of Business:**Current Mailing Address:****New Mailing Address:**

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: RISMAN, ROBERT G TRUSTEE
Address: 4832 RICHMOND ROAD, SUITE 200
City-St-Zip: CLEVELAND, OH 44128

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT G RISMAN

MGR

02/07/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date