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## **COVER LETTER**

_	ration Section on of Corporations				
SUBJECT: _	ista Grand Senior Housing, LLC				
_	Name of Limited Liability Company				
Dear Sir or Ma	dam:				
The enclosed R	tegistered Agent/Registered Office Chang	ge and fee(	(s) are submitted for filing.		
Please return al	Il correspondence concerning this matter t	to the follo	owing:		
Sharon H. Y	arnall				
	Name of Person	,			
The NuRock	Companies				
	Firm/Company				
800 North P	oint Parkway - Suite #125				
	Address				
Alpharetta, (	GA 30005				
	City/State and Zip Code				
syarnall@nu	ırock.com				
E-mail ad	dress: (to be used for future annual report	t notificati	on)		
For further info	ormation concerning this matter, please ca	ıll:			
Sharon H. Y	arnall 67	<sup>78</sup>	297-3408		
	Name of Person	Á	rea Code & Daytime Telephone Number		
Registr Divisio Clifton 2661 E	et/Courier address: ration Section on of Corporations a Building executive Center Circle assee. Florida 32301	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314		
Enclosed is a check for the following amount:					
<b>2</b> \$25	Filing Fee	□ \$55 F	iling Fee & Certified Copy		

## • 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.

l. Na	me of the limited liability company: Vista Grand	Senior Hous	ing, LLC
2. (a)	Vista Grand Senior Housing, LLC	sta Grand Senior Housing, LLC	
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	800 North Point Parkway - Suite #125	800	North Point Parkway - Suite #125
	Alpharetta, GA 30005	Alp	pharetta, GA 30005
	6/16/2010	L10	0000642657
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	CT Corporation		
5. (a)	Registered Agent and Registered Office shown on the records of	f the Florida Dept.	of State:
	CT Corporation		
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS)	
	1200 South Pine Island Road		
	Plantation	33324	2017 AUG 31 PM 4: 32 VALLAHASSEE, FLORIDA
	D. H. Diad. Named Associations Florida		SST IT
(b)	Robby Block - Nurock Acquisitions Florida,		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	<u>d Office address:</u>	
	8794 Boynton Beach Boulevard		
	NEW Registered Office Address:		
	Suite #219		<del></del>
	Boynton Beach . F	L 33472	
the cha agent v	imited liability company is not organized under the launge or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registered liability compa of the limited e limited liabil	d office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.  G. Hoskins, MGR/MEMBER
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obl to mer notified	by accept the appointment as registered agent and as ions of all standes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, a d in writing of this change	gree to act in the performance led for in Chap I hereby confir	his capacity. I further agree to comply with the of my duties, and I am familiar with and accep ter 605, F.S. Or, if this document is being filea m that the limited liability company has been

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