L13000123127

(Re	questor's Name)							
(Ad	dress)							
(Ad	dress)							
(Cit	y/State/Zip/Phon	e #)						
PICK-UP	☐ WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies	_ Certificate	s of Status						
Special Instructions to Filing Officer:								

Office Use Only



300267257023

12/11/14--01018--004 **50.00

SEERETARY OF STATE SEER TARE

FILED

B. BOSTICK
DEC 1 6 2014
EXAMINER

FÖODMAN HUNTER & KARRES, PLLC

ATTORNEYS AT LAW 521 E. Morehead Street, Suite 330 Charlotte, North Carolina 28202

PHONE: 704-347-0000

704-333-3323

ADAM W. FOODMAN CATHERINE C. HUNTER* ANDREW T. KARRES CLINTON CHANDLER

FAX

:704-333-3380

*Licensed in South Carolina

December 10, 2014

Corporations Division Florida Secretary of State 2661 Executive Center Circle Tallahassee, FL 32301-5020

RE: Change of Registered Agents

Dear Secretary of State:

Enclosed please find Statements of Change of Registered Office for ESA Four Oaks I, LLC and ESA Princeton, NC together with my firm's check in the amount of \$50.00 for the filing fees. Time is of the essence is these filings, if expedited fees are required please contact us immediately.

You may contact my office at the address and phone number above for assistance. Email to rmcgaha@fhklaw.com

Sincerely,

Ruth McGaha Office Manager

Enclosures

rm

rmcgaha@fhklaw.com

2011 DEC 11 P 2: 29
REGRETARY OF STATE

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENTOR 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	une of the limited liability company: ESA Princeton	NC,	LLC				_
2.	(a)	2460 West 26th Ave, Suite 280C	ľ	b)				
	\ <i>\</i>	Principal office address of limited liability company:		M	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			•
		(Note: MUST BE STREET ADDRESS) Denver, CO 80211			(Note: MAT BE POST O	r	<u>QX</u>)	
		Deliver, GO 60211	-					-
			-					-
		08/29/2013		L1300012	3127			
3.		Date of filing/registration in Florida	4.		Document number			•
5.	(a)							
	` '	Registered Agent and Registered Office shown on the records of the Florida Dept. of State				≯ e⇒	22	
		Lindsay Herold					Ξ	
		Registered Office Address (MUST RE FLORIDA STREET AL	27		E F	030		
		4150 St Johns Pkwy, Suite 1000			ر اور بارد اور بارد			
		Sanford ,FL 3	32771		•	- SE		
						100 mm	ס	í
	(b)						i,	
		Enter name of NEW Registered Agent and/or NEW Registered O	ilice no	ldress:		**************************************	2	
		CT Corporation System						
		NEW Registered Office Address:						
		1200 South Pine Island Road						
		Plantation , FL 3	3324					
the age	châ ent w s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of elegation of organization or the operating agreement of the li	of the he regi pility co	State of Flor stered office ompany, it is nited liability	and the business office hereby confirmed that company or as otherw	of the r	egistered ige(s)	ļ
<u>s</u>	lgnat	ure of a member or authorized representative of a member			v.C. Fotopoulos, Pro- Printed or typed name of si			
Ili pro the to i not	ierel oviși obli mere tifica	oy accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete prigations of my position as registered agent as provided by reflect a change in the registered office address, I he inwriting of this change. On Krist, Ass. Secretary agent	e lo ac erforn for in ereby c	i in this capa ance of my d Chapter 605, onfirm that th	city. I further agree to uties, and I am familia F.S. Or, if this docum he limited itability com	comply r with a ent is be pany ha	with the nd accept ing filed s been	!