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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

S Warren MAY - 8 2017

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Nationwide Umatilla Plaza, I	_LC					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.				
Please return all correspondence concerning thi	s matter to the	following:				
Carrie Schramek						
Name of Person						
Franklin Street Management Services						
Firm/Company		_				
600 N. Westshore Blvd., Suite 600						
Address		_				
Tampa, FL 33609						
City/State and Zip Code		<u> </u>				
carrie.schramek@franklinst.com		/				
E-mail address: (to be used for future annual	ual report notifi	ication)				
For further information concerning this matter,	please call:					
Carrie Schramek	813	658-3344				
Name of Person		Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:						
☑ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy				
INHS18 (2/14)						

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: Nationwide U	Jmatilia Plaza, L	LC		
2.		100 N. Lasalle Street, Suite 1111	(b)			_
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	-	of limited liability company: BE POST OFFICE BOX)	
		Chicago, IL 60602		(Note: MALE	BE FOST OF FICE BOA	
		View Control of the C				
		03/02/15	L150000	046168		
3.		Date of filing/registration in Florida	4.	Document nu	ımber	-
5.	(a)	Barbara Henkhaus				
٥.	(4)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Sta	— ate:	~	÷ 1
					den 📥	
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	_	FG 3	7.00
		555 Preston Road			書のフロ	، ية فر ر
		Longwood	32750		SSE	
					m9 3 0	*
	(b)	Carrie Schramek		<u></u>	100 Si	• 👬
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address:		8 m 6	ŧ
		Franklin Street Management Services				
		NEW Registered Office Address:	-	_		
		600 N. Westshore Blvd., Suite 600	<u>.</u>	_		
		Tamas	2222			
		Tampa, FI	_33609	_		
the age wa	cha ent v s/we	imited liability company is not organized under the lainge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liberature authorized by an affirmative vote of the members of of organization or the operating agreement of the	f the registered officiability company, it of the limited liability	ce and the busing is hereby conficted in the company or its confidence or its con	ness office of the register irmed that the change(s) as otherwise provided in	
_	ignat	ture of a member or authorized representative of a member	HAMA Mon	NMSen - F Printed or types	Juthorized Repr	escatation
	•	by accept the appointment as registered agent and agens ons of all statutes relative to the proper and complete igations of mo position as registered agent as provide by reflect a change in the registered office address, I in writing of this of ange.	ree to act in this ca performance of my ed for in Chapter 60 hereby confirm tha	- •	,	he ept ed
Si	gnatu	re of Registered Agent				