

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue
Tallahassee, Florida 32301
(850) 681-6528

HOLD FOR PICKUP BY UCC SERVICES OFFICE USE ONLY

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November 8, 2000

SERVICES NHC		ORPORATION NAME (S) AND DOCUMENT NUMBER (S):  //Stuart LLC
Filing Evidence  ☑ Plain/Confirmation Copy		Type of Document  ☐ Certificate of Status
□ Certified Copy		□ Certificate of Good Standing
		□ Articles Only
Retrieval Request  □ Photocopy		<ul> <li>□ All Charter Documents to Include Articles &amp; Amendments</li> <li>□ Fictitious Name Certificate</li> </ul>
□ Certified Copy		□ Other
NEW FILINGS  Profit  Non Profit  Limited Liability  Domestication  Other	X	AMENDMENTS  Amendment  Resignation of RA Officer/Director  Change of Registered Agent  Dissolution/Withdrawal  Merger
OTHER FILINGS  Annual Reports  Fictitious Name		REGISTRATION/QUALIFICATION 00 3456327 -17/08/0001024005 Foreign ****350.00 *****25.00 Limited Liability
Name Reservation		Reinstatement
Reinstatement		Trademark
		Other

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

The name of the limited liability company is:	NHC PLACE/STUART, LLC	
2. The mailing address of the limited liability con		VAY, STUART, FL 349
10/04/99	L9900006386	·
3. Date of filing/registration in Florida	4. Document number	-
5. The name of the registered agent and the register Florida Department of State:	ered office address as shown on the	records of the
RAINS, JOHN H III		
	Name	
201 N FRANKLIN STREI		
	Address	
TAMPA, FL 33602	State and Zip	
6. The name and address of the new registered age	•	OO NOV
NRAI SERVICES, INC.		APP FTA HAS
	ame	
526 E PARK AVENUE		
Florida street address	(P.O. Box NOT acceptable)	IZ: 2! STATI
TALLAHASSEE	FL 32301	0 A
City, Sta	ate and Zip	
If the limited liability company is not organized un confirmed that after the change or changes are may and the business office of the registered agent will liability company, it is hereby confirmed that the of the members of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company.  (Signature of a member or authorized representative of a member)	de, the Florida street address of the le identical. Or, in the case of a Fchange(s) was/were authorized by a sotherwise provided in the articles mpany.	registered office Florida limited In affirmative vote of
Richard F. La Roche, Jr. (Printed or typed name of signee)	, 	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 608, F.S. Or, if this document is being fit address, I hereby confirm that the limited liability NRAI SERVICES, INC.	ent and agree to act in this capacity to the proper and complete perform of my position as registered agent led to merely reflect a change in the company has been notified in writt	<ol> <li>I further agree to nance of my duties, as provided for in e registered office ing of this change.</li> </ol>

NRAI SÉRVICES, INC. Ed Hand Cost.
(Signature of Registered Agent)
ED HAND. ASST. SEC.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

**FILING FEE: \$25.00** 

INHS18(10/99)