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ACCOUNT NO. : 072100000032 REFERENCE: 336514 4355829 AUTHORIZATION COST LIMIT ORDER DATE: August 25, 2006 ORDER TIME: 9:59 AM ORDER NO. : 336514-020 CUSTOMER NO: 4355829 CHANGE OF AGENT NAME: SENIOR LIVING/MT. HUNTER'S WOODS, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_ CERTIFIED COPY PLAIN STAMPED COPY CONTACT PERSON: Heather Chapman

EXAMINER'S INITIALS:

## 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.

I. The name of the limited l	iability company is	SENIOR LIVI	NG/MT. HUNTER'	s woods, llc
2. The mailing address of th	e limited liability c	company is:		·
10 Woodbridge Center Drive, Su	ite 420, Woodbridge, N	NJ 07095		•
January 31, 2000		1	M00000000189	
3. Date of filing/registration	in Florida	4	. Document nur	nber
5. The name of the registere Florida Department of Sta		istered office ad	ldress as shown	on the records of the
	NR.	Al Services, Inc.		
	- "	Name	•	1.0 O
·	2731 Execu	utive Park Drive, S	uite 4	06 AUG 29 TALLAHAS
		Address		A S
		eston, FL 33331	7	# P
	City	, State and Zip		S 20 0
5. The name and address of	the new registered :	agent and/or off	āce:	PHID: 30 SEE: FLORI
	Corporati	ion Service Compa	ny	S is
		Name		型型 0
	· 120	1 Hays Street	·	Or.
	Florida street addre	ss (P.O. Box N	OT acceptable)	
·	Tallahassee	FL	32301	
	City,	State and Zip		
If the limited liability compactonfirmed that after the charand the business office of the liability company, it is here of the members of the limit or the operating agreement of the member of authorize	nge or changes are a the registered agent was confirmed that the ed liability compan of the limited liability	made, the Florid will be identical ne change(s) wa y or as otherwis ity company.	da street address . Or, in the case s/were authorize	of the registered office of a Florida limited ed by an affirmative vote
Show	Rother			•
(Printed or typed name of signee)	()-/			
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if this address, I hereby confirm the Chapter of Registered Agent)  (Signature of Registered Agent)  Michelle R. Vannoy,	Asst. VP	<u>man</u>		
Division	of Corporations, I	P.O. Box 6327,		L 32314