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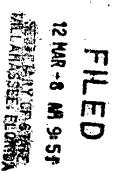


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OLEMAN OF CORPORATIONS

OLIVISION OF CORPORATIONS



D. BRUCE

MAR 0 9 2012

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : 120111

7864759

AUTHORIZATION :

COST LIMIT :

ORDER DATE: March 6, 2012

ORDER TIME : 9:49 AM

ORDER NO. : 120111-285

CUSTOMER NO: 7864759

CHANGE OF AGENT

NAME:

INVERRARY RETIREMENT

INVESTORS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY ____ PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

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.

•		
1. Name of the limited liability company: <u>INVERRARY</u>	RETIREMENT INVESTORS, LLC	
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: 3570 Keith Street, N.W. Cleveland, TN 37312	
(Most be Street Abbress)	Cicycland, 11v 37312	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
09/09/2002	M0200002340	
	4. Document number	
5. (a) Registered Agent and Registered Office shown on t		
Registered Agent:	C T Corporation System	
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:	
NEW Registered Agent:	Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
The state of the s	Tallahassee ,FL 32301	
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cathereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company.	address of the registered office and the business se of a Florida limited liability company, it is	
(Signature of a member or authorized representative of a member)	•	
Maureen Cathell, Authorized Person (Printed or typed name of signee)		
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the program familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified by:	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.	
(Signature of Registered Agent) Corporation Service Company	Vlvia Oueppet, Asst. Vice President	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00