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(Requestor's Name)						
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						

Office Use Only



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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: October 4, 2016

Order#: 296685-181

Re: SOUTH PORT SQUARE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Mary Rivers

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX ___ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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: SOUTH PORT	SQUARE	, LLC	
2	(a)	C/O BROOKDALE	(b)	
	(w) .	Principal office address of limited liability company:	("		Mailing address of limited liability company:
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)
		111 WESTWOOD PLACE, SUITE 400			
		BRENTWOOD, TN 37027	_		
		09/09/2002		M0200000	02371
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	CT CORPORATION			
		Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	: :
		1200 S PINE ISLAND RD			
		Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS	1	•
		PLANTATION , FI	33324		三 <u>二</u> (5)
					· 걸음 8
	(b)	Corporation Service Company			OCT +6 REDARN AHASSI
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	l Office add	lress:	
		1201 Hays Street			· · · · · · · · · · · · · · · · · · ·
		NEW Registered Office Address:			₹ N
		Tallahassee , FL	32301		
the ag	e cha ent w s/we	mited liability company is not organized under the lange or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited ling authorized by an affirmative vote of the members of organization or the operating agreement of the	f the registability coof the limited l	tered office mpany, it is ited liability iability com	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in
_	Signat	ure of a member or authorized representative of a member		<u> </u>	Printed or typed name of signee
pre the to no	ovisie e obli mere tified	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change. The of Registered Agent Corporation Service Company	e performe ed for in C hereby co	ance of my c Chapter 605 Onfirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been by, Assistant Vice President