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SECRETARY OF STATE LLAHASSEE. FLORIDA

J. SAULSBERRY EXAMINER

APR 25 2012

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: NHC-FL110,	LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: c/o National Home Communities 6991 E Camelback Road, Suite B-310 Scottsdale AZ 85251
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	c/o National Home Communities 6991 E Camelback Road, Suite B-310 Scottsdale AZ 85251
12/09/2005	M05000006835
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	C T Corporation System
Registered Office Address:	C T Corporation System 1200 South Pine Island Road Planation FL 33324 A T R
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u>	E.O.
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Tallahassee FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company. Maure Cattlett	t address of the registered office and the business ase 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 a comply with the provisions of all statutes relative to the pro am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a c confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.
By:	Drace T-Kirbly
•	Grace E. Kirby, Asst. Vice President
Division of Corporations, P.O. Box	6527, Tallahassee, FL 32314

FILING FEE: \$25.00



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 12000000195

REFERENCE: 178784

7878309

AUTHORIZATION :

COST LIMIT :

ORDER DATE: April 24, 2012

ORDER TIME: 10:29 AM

ORDER NO. : 178784-068

CUSTOMER NO: 7878309

CHANGE OF AGENT

NAME: NHC-FL110, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS: