M0600000661

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE
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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: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: June 30, 2015

Order#: 682544-167

Re: KTR NORTH FLORIDA 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: Lindsey Lockard

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. N	ame of the limited liability company: KTR NORTH I	FLORIDA LL	C
2. (a)	Five Tower Bridge	(b)	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	300 Barr Harbor Drive, Suite 150		
	Conshohocken, PA 19428		
	02/01/2006	<u>N</u>	106000000601
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	C T Corporation System		
• •	Registered Agent and Registered Office shown on the records of	the Florida De	pt. of State:
	1200 South Pine Island Road		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	SECRE TALLAR
	Plantation , FI	_ 33324	
(b)	Corporation Service Company		TERS AND
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addres	AM 10: 36 E. FLORID
	1201 Hays Street		
	NEW Registered Office Address:		
	Tallahassee , FI	, 32301	
the cha agent was/w	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the register ability comp of the limited	ed office and the business office of the registered pany, it is hereby confirmed that the change(s) I liability company or as otherwise provided in
/s/ Mi	chael T. Blair	Michae	l T. Blair, Authorized Person
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obi to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act in performanc d for in Cha hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been
Signatu	The opregistered Agent Corporation Service Company	BY: Sylv:	ia Queppet, Asst. Vice President