MOGOOOOOGGGGO

(Re	equestor's Name)							
(Ad	dress)							
(Address)								
(City/State/Zip/Phone #)								
PICK-UP	☐ WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies	_ Certificate	s of Status						
Special Instructions to Filing Officer:								
		,						

Office Use Only



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10/04/16--01026--011 **25.00

OCT 0 5 2016 S. YOUNG 16 OCT -4 PM 2: 45

SEBRETARY OF STATE TALL TALLS TALLS



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: September 30, 2016

Order#: 296677-082

Re: AHC STERLING HOUSE OF GAINESVILLE, 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.

OUCA.XCOA

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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: AHC STERLING H	IOUSE	OF GAINE	ESVILLE, LLC			
2	(a)	111 WESTWOOD PLACE, SUITE 400	(b)					
2. (u)		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		BRENTWOOD, TN 37027						
		11/29/2006	_	M0600000	06610			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	CT CORPORATION SYSTEM						
٠.	(4)	Registered Agent and Registered Office shown on the records of the I	Florida l	Dept. of State:	:		Fig.	
		1200 SOUTH PINE ISLAND ROAD				16 OCT -4		
		Registered Office Address (MUST BE FLORIDA STREET ADD	ORESS)			23		
						1	の世上	
		PLANATION , FL 3	33324			PH		
	4.	Comparation Constant				2: 45		
	(b) .	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Off</u>	lice add	recc.		O1	124	
		Place name of New Negastered Agent and/or Negastered on	iice addi	. 0.53				
		1201 Hays Street						
		NEW Registered Office Address:						
		Tallahassee, FL_ 3	2301					
the age was the	char ent w s/we artic	mited liability company is not organized under the laws on the changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited liability re authorized by an affirmative vote of the members of the class of organization or the operating agreement of the limited.	regist lity corne limit nited lia	ered office npany, it is red liability ability comp Imi, Author	and the business office hereby confirmed that t company or as otherwise pany. ized Person	of the re the changese provide	egistered ge(s)	
S	ignati	of a member or authorized representative of a member			Printed or typed name of sign	nee		
pro the to n not	visio obli nere ified	y accept the appointment as registered agent and agree to so of all statutes relative to the proper and complete per gations of my position as registered agent as provided for ly reflect a change in the registered office address, I here in writing of this change. The of Registered Agent Corporation Service Company B	forma or in Cl eby coi	nce of my d hapter 605, ifirm that ti	city. I further agree to duties, and I am familiar F.S. Or, if this docume he limited liability composy, Assistant Vice Pres	with an ent is bei eany has	with the d accept ing filed been	
6		Division of Corporations P.O. Box				31UCIII		