

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190002305403)))



H190002305483ABCY

To:	Division of Corporations		
	Fax Number (850)617-6383		
From:	;		
	Account Name : C T CORPORATION SYSTEM		
	Account Number : FCA000000023 Phone : (614)280-3338		
	Fax Number : (954)208-0845		
Enter an	the email address for this business entity mual report mailings. Enter only one email	to be used I address pleas	or futur se.
án	the email address for this business entity inual report mailings. Enter only one email	to be used faddress pleas	or futur se.**
án	nual report mailings. Enter only one email	to be used f	or futur
án	nual report mailings. Enter only one email	address pleas	or futur
án	LLC REGISTERED AGENT CH	address pleas	or futur
án	LLC REGISTERED AGENT CHA	address pleas	or futur
án	LLC REGISTERED AGENT CHA	address pleas	or futu
án	LLC REGISTERED AGENT CH HCP SLB FLORIDA, LLC Certificate of Status	address pleas	or futur
án	LLC REGISTERED AGENT CHA	address pleas	or futu:
án	LLC REGISTERED AGENT CH HCP SLB FLORIDA, LLC Certificate of Status	address pleas	or futur

Electronic Filing Menu

Estimated Charge

Corporate Filing Menu

Help

\$55.00

AUG 06 2019 M. SOLOMON

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 ogent, or both, in the State of Florida.

(a)	Principal office address of finated hability company:	— (b	Mailing address of limite	d liability company:	
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BO.		
	1920 Main Street, Suite 1200		1920 Main Street, Suite 1200		
	Irvine, CA 92614		Irvine, CA 92614		
	03/22/2007 Date of filing/registration in Florida		M07000001708		
•	Date of filing/registration in Florida	4.	Document number		
. (a)	CORPORATION SERVICE COMPANY				
. (Registered Agent and Registered Office shown on the records 1201 HAYS STREET	of the Florida	Dept of State.	2019)
	Registered Office Address (MUST BE FLORIDA STREE	2	2019 AUG	•	
	TALIAHASSEE	FL <u>. ³²³⁰¹</u>		design to	
(b)	CT Corporation System			19 E	
(• /	Enter name of NEW Registered Agent and/or NEW Register	red Office ade	lr <u>as</u> :	<u></u>	
	1200 South Pine Island Road				
	NEW Registered Office Address				
	Plantation I				
ie cha gent w ras we le arti	united liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the	laws of the of the regis I liability co s of the lim he limited t	State of Florida, it is hereby contered office and the business of supany, it is hereby confirmed tited liability company or as oth iability company.	ffice of the register that the change(s)	
-3:50	Belon creation of a member of a member		cia Belanger, Secretary Printed or typed name	of signed	
l herel vovisi he obli o mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple agentions of my position as registered agent as providy reflect a change in the registered office address, the writing of this change. As the Vertical Section of the Complete address of the first section of the change.		•	•	he ept ed