MD7000004530

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



400266922244

12/19/14--01033--016 **25.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

Office Use Only

02914



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 llockar2@cscinfo.com

Date: December 17, 2014

Order#: 409832-246

Re: LP ORANGE PARK, 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.

X 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: LP ORANGE	PARK, LLC	:		
2. (a)		(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)	
	12201 Bluegrass Parkway			4	
	Louisville, KY 40299				
	07/31/2007		M07000	004530	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	C T Corporation System				
J. (u)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of Stat	- e:	
				_	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)		-	
	1200 South Pine Island Road			*~ ₁	
	Plantation , 1	FL 33324		3 4 C	
	, ,			SION O	
(b)				- 19 OF C	
	Enter name of NEW Registered Agent and/or NEW Register	ed Office add	ress:	PH	
	1201 Hays Street			PH 1: 55	
	NEW Registered Office Address:			- 55 ions	
				-	
	Tallahassee , 1	FL 32301			
the cha agent v was/we the arti- Signa I here provise the obli- to mere	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street of a member of accept the appointment as registered agent and a cions of all statutes relative to the proper and completing ions of my position as registered agent as providedly reflect a change in the registered office address, d in writing of this change.	of the regist liability cors of the limited li	ered officenpany, it is ted liability con Priebe, A	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in appany. uthorized Person Printed or typed name of signee activ. I further agree to comply with the	

Signature of Register Agent Corporation Service Company BY: Sylvia Queppet, Asst. Vice President