M07000005915

| (Requestor's Name) | | | | | |
|---|-------------------|-------------|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (Cit | y/State/Zip/Phon | e #) | | | |
| PICK-UP | WAIT | MAIL | | | |
| (Bu | siness Entity Nar | me) | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificate: | s of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
| | | | | | |
| | | | | | |
| | | ٠. | | | |

Office Use Only



900262806299

08/06/14--01019--013 **25.00

THE C PH 28 SINE

RARDCH 8



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: August 4, 2014

Order#: 232479-049

Re: WILTON MANORS (WILTON MANORS) HA, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 ...

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: Janis M. Smith

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. | Na | me of the limited liability company: WILTON MANOI | RS (WIL | LTON MANORS) HA, LLC |
|-------------------------------|---|---|--------------------------------------|---|
| 2. | (a) | 2262 Wilton Drive | _ (b) | b)8816 Six Forks Road, Suite 201 |
| | | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | | Wilton Manors, FL 33305 | _ | Raleigh, NC 27615 |
| | | | _ | |
| | | | | |
| | | 10/04/2007 | . <u>-</u> - | M07000005975 |
| 3. | | Date of filing/registration in Florida | 4. | Document number |
| 5. | (a) | Incorporating Services Ltd | | |
| | | Registered Agent and Registered Office shown on the records of the | ne Florida l | a Dept. of State: |
| | | 1540 Glenway Drive | | |
| | | Registered Office Address (MUST BE FLORIDA STREET A | DDRESS) | <u>sp</u> |
| | | | | |
| ţ | | Tallahassee F1. | 32301 | |
| | | , , , ,, | 02001 | <u></u> |
| | (b) | Corporation Service Company | | |
| | | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u> | Office add | ldress: |
| | | | | |
| | | 1201 Hays Street NEW Registered Office Address: | | |
| | | Registered Office Address. | | |
| | | | | |
| | | Tallahassee , FL | 32301 | <u> </u> |
| the ag wa | e cha ent w is/we | mited liability company is not organized under the law nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l | the regist bility cor the limi | stered office and the business office of the registere ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in |
| _ | Signal | ure of a member or authorized representative of a member | Dona | na Priebe, Authorized Person Printed or typed name of signee |
| l i pri the to no | herel ovisie obli mere tified | by accept the appointment as registered agent and agreous of all statutes relative to the proper and complete pications of my position as registered agent as provided in the registered office address, I have in the stange of this change. | performa for in Ci ereby coi | t in this capacity. I further agree to comply with the lance of my duties, and I am familiar with and acce Chapter 605, F.S. Or, if this document is being file onfirm that the limited liability company has been |
| 51 | Puara | Corporation Service Company | DI: UI | Srace E. Kirby, Asst. VP |