Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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LLC REGISTERED AGENT CHANGE CHR LAKELAND LLC

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J SHIVERS

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.

2. (a)	200 International Circle #3500, Hunt Valley, MD 21030		ъ) <u>200</u>	International Circle	national Circle #3500, Hunt Valley, MD 21030	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			-	of limited liability company: BE POST OFFICE BOX)	
		_				
	11/7/2008		M080	000004949		
3.	Date of filing/registration in Florida	4.		Document n	umber	
5. (a)	CORPORATION SERVICE COMPANY					
(,	Registered Agent and Registered Office shown on the records of	the Flori	da Dept.	of State:		
	1201 HAYS STREET					
	Registered Office Address MUST BE FLORIDA STREET					
	TALLAHASSEE , FI	32301	-2525		15, SECO	
(b)	C T Corporation System				JUN 16 ARETAR ARASS	
	Enter name of NEW Registered Agent and/or NEW Registered	l Office :	ddress;			
	NEW Registered Office Address:					
	1200 South Pine Island Road				A COL	
	Plantation	33324				
Sign I heroprovisithe obtomernotifie By: Signat	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the authorized representative of a member the street appointment as registered agent and agricions of all statutes relative to the proper and complete ligations of my position as registered agent as provided in writing of this change. The properties address, I am a the registered office address, I am a the registered of t	f the regality of the list imited limited limi	gistered companied li liabilitanifer K. ct in the confirmation of	l office and the bus ny, it is hereby confiability company of ty company. Printed or type is capacity. I furth of my duties, and I of 605, F.S. Or, if n that the limited li	iness office of the registered firmed that the change(s) ras otherwise provided in ed name of signee there agree to comply with the am familiar with and accept this document is being filed ability company has been	