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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: March 28, 2014

Order#: 072704-070

Re: CHR POMPANO BEACH 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: Evelyn Wright 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.	Name of the limited liability company: CHR POMPANO BEACH LLC							
2.	(a) _	200 International Circle #3500 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) 200 International Circle Mailing address of limite (Note: MAY BE POS			y company:		
		Hunt Valley, MD 21030		Hunt Val	lley, MD 21030			
3.		11/07/2008 Date of filing/registration in Florida	_ 4.		0004952 Document number			
5.		C T Corporaton System Registered Agent and Registered Office shown on the records of the	e Florida I	Dept of State:				
			C I Kalou i	opi. or biate.				
1200 South Pine Island Road Registered Office Address (MUST BE FLORIDA STREET ADDRESS)								
	Registered Office Address [MOST BE FLORIDA STREET ADDRESS]							
						Ţ.		
		Plantation , FL_	33324			子器		
						13 19 19		
	(b)	Corporation Service Company				工學習		
		Enter name of NEW Registered Agent and/or NEW Registered Office address:						
						# 19 LI		
		1201 Hays Street NEW Registered Office Address:				9 1		
		NEW Registered Office Address:						
		Tallahassee , FL_	32301					
the age wa	cha ent w s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regist pility con the limit	ered office npany, it is led liability	and the business office of hereby confirmed that the company or as otherwise	the registered change(s)		
		() 26 -	Dona	a Priebe,	Authorized Person			
Signature of a member or authorized representative of a member Printed or typed name of signee								
I le proteine to	ierel ovisie obli mere tified orpor	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I he is a writing of this change. The diagram of this change.	e to act i performa for in Cl preby con	n this capa nce of my d hapter 605, yfirm that t	city. I further agree to co luties, and I am familiar w F.S. Or, if this document the limited liability compa	omply with the with and accept t is being filed ny has been		
•	-	e of Régistered Agent						
В	By: Elizabeth A. Dawson, Asst. Vice President Division of Corporations● P.O. Box 6327● Tallahassee, FL 32314							

FILING FEE: \$25.00

INHS18 (2/14)