MD8000004962

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(Cit	ty/State/Zip/Phone	#)					
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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#: 072704-040

Re: CHR BOCA RATON LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

<u>XX</u> 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.

OUCA.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: CHR BOCA F	RATON	LLC			
2.	(a)	200 International Circle #3500 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) 200 International Circle #3500 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		Hunt Valley, MD 21030	-	Hunt Va	alley, MD 21030		
		11/07/2008		M0800	0004962		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	C T Corporaton System					
		Registered Agent and Registered Office shown on the records of the	ne Florida	Dept, of State	e:		
		1200 South Pine Island Road					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)				,
						_	1. S. Jan
		Plantation , FL	33334			P.P.S	544 1813
		Tiantation , FL	00024		•	οŭ	- 12円 - 12円 - 1
	(b)	Corporation Service Company				<u> </u>	
	\- /	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	-	15. 12.	- 4일다. - 65
						123	亚 克
		1201 Hays Street				42	
		<u>NEW</u> Registered Office Address:					.,
					-		
			32301				
the age	chaent w s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia re 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	ered office npany, it is ted liability	e and the business office is hereby confirmed that to y company or as otherwi	of the	registered ange(s)
		()26	Don	a Priebe,	Authorized Person		
S	ignat	ne of a member or authorized representative of a member		,	Printed or typed name of sig	nee	
pro the to i	ovisio obli nere rified orpor	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete propers of my position as registered agent as provided by reflect a change in the registered office address, I have been service Company	ee to act performa I for in C ereby co	in this cape nce of my d hapter 605 nfirm that t	acity. I further agree to duties, and I am familiar , F.S. Or, if this docume the limited liability comp	compl with a ent is b cany h	y with the and accept peing filed as been
	-	e of Régistered Agent					
D	y. ⊏	lizabeth A. Dawson, Asst. Vice President Division of Corporations P.O. B	ox 6327	Tallahas	see, FL 32314		

FILING FEE: \$25.00