Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000019168 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA00000023

Phone Fax Number : (850)222-1092 : (850)878-5368

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.** Email Address:

LLC REGISTERED AGENT CHANGE AHC METRO HARBOURSIDE, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

T. Burch JAN 2 7 2014 Help

TEURON TANZA

https://efile.sunbiz.org/scripts/efilcovr.exe

1/24/2014

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, Floi company submits the following statement in order to che both, in the State of Florida.	rida Statutes, the undersigned limited i ange its registered office or registered as	liability gent, or
1. Name of the limited liability company: AHC METRO	HARBOURSIDE, LLC	
2. (a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny: 900 CLARK ST. EVANSTON, IL 60201	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	900 CLARK ST. EVANSTON, IL 6020(
01/16/2009	M09000000243	
3. Date of filing/registration in Florida	4. Document number	7
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept of State	
Registered Agent:	CORPORATION SERVICE COMPANY	S STREET
Registered Office Address:	1201 HAYS STREET TALLAHASSEE, FL 32301-0526-0	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address:	
NEW Registered Agent:	C T Corporation System	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road Plantation FL 3332	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change the members of the limited liability company or as otherwise operating agreement of the limited liability company. Signature of a member or authorized (coresentative of a member in the limited of typed name of signee. I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the provisions of all statutes relative to the provisions.	Florida street address of the registered of ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vise provided in the articles of organization	tice d . vote of on or
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 615, F.S. Or, if this document is being filed to h address, I hereby confirm that the limited liability compa By: Kristin Bolden Signature of Registered Agent Assistant Secretary	iosition as registered agent as provided fi terely reflect a change in the registered o ny has been notified in writing of this chi	or in ffice inge.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25,00

INHS18 (12/13)