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K.SALY EXAMINER APR 25 2012



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE: 178784

7.84 7878309

AUTHORIZATION :

COST LIMIT : \$ 25.00

COSI LIMII : \$ 25.00

ORDER DATE: April 24, 2012

ORDER TIME : 10:52 AM

ORDER NO. : 178784-124

CUSTOMER NO: 7878309

CHANGE OF AGENT

NAME: NHC-FL138, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 608.416 or 608.508, 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: NHC-FL138, L	LC
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	Suite B-310 Scottsdale AZ 85251
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	22 CS
09/20/2011	M11000004717
3. Date of filing/registration in Florida	1. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	CT Corporation System
Registered Office Address:	1200 Sout Pine Island Road Plantation FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	Registered Office address: Corporation Service Company
	1201 Hays Street
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301
If the limited liability company is not organized under the la that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the carbided confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. Watter Cattley	address of the registered office and the business se of a Florida limited liability company, it is
(Signature of a member or authorized representative of a member)	
Maureen Cathell, Authorized Person (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statules relative to the prof am familiar with and accept the obligations of my position a F.S. Or, if this document is being filed to merely reflect a cl confirm that the limited liability company has been notified	ree to act in this capacity. I further agree to per and complete performance of my duties, and I is registered agent as provided for in Chapter 608, unge in the registered office address, I hereby in writing of this change.
By: Dine Ethiolog	
(Signature of Registered Agent) Grace E. Kirby, Asst. VP	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00