M12000003463

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NAME:

UB (TA-PENSACOLA) LESSEE, LLC

TYPE OF FILING: CHANGE OF AGENT

COST:

25.00

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

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

Pursuant to the provisions of sections 605.0114, 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.

both, in the State of Pioriaa.		
1. Name of the limited liability company: UB (TA-PEN	ISACOLA) LESSEE, LLC	
2. (a) Principal office address of limited liability compan (<i>Note: MUST BE STREET ADDRESS</i>)		
	Rosemont, IL 60018	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	•	
June 19, 2012	M12000003463	AR AH
3. Date of filing/registration in Florida	4. Document number	TARY ASSE
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of St	1.71
Registered Agent:	Corporation Service Company	
Registered Office Address:	1201 Hays Street	ATE RIDA 09
	1201 Hays Street	
	Tallahassee, FL 32301-2525	
NEW Registered Agent:	National Corporate Research, Ltd.,	Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Drive	
	Tallahassee,FL_3	2301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherw the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered tical. Or, in the case of a Florida limi) was/were authorized by an affirmati	office ited ive vote of
Robert Vanecko Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my provided to me address, thereby confirm that the limited liability compared in the companies of Registered Agent Mark Thomas, Assistant Secreta Division of Corporations, P.O. Box 60	roper and complete performance of mostlion as registered agent as provide erely reflect a change in the registere by has been notified in writing of this arry	agree to y duties, d for in d office change.

FILING FEE: \$25.00

INHS18 (12/13)