1306605685

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
.! Copies Certificates of Status						
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A. BUTLER JAN 18 2023 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 344555 5042714						
AUTHORIZATION: Carelle Cera and						
COST LIMIT : \$ /2/5.00						
ORDER DATE: January 11, 2023						
ORDER TIME: 2:09 PM						
ORDER NO. : 344555-049						
CUSTOMER NO: 5042714						
<u>CHANGE OF AGENT</u>						
CHANGE OF AGENT NAME: HTA-AW NORTH SHORE, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker						
EXAMINER'S INITIALS:						

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:HTA-AW NOR	TH SHORE, L	rc
		16435 North Scottsdale Road, Suite 320		
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Scottsdale, AZ 85254		
		09/10/2013	M13	000005685
3.		Date of filing/registration in Florida	- 4. —	Document number
	<i>(</i>)	C T Corporation System		
٥.	(a)	Registered Agent and Registered Office shown on the records o	f the Florida Dept	. of State:
		1200 South Pine Island Road		
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
		Plantation , F	33324	202
		, 1	•,,	023 JAN 17
	(b)	Enter name of NEW Registered Agent and/or NEW Registere		
	(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office address	r ·
		Corporation Service Company		
		NEW Registered Office Address:		H 44
		1201 Hays Street		
		Tallahassee, F	L	
ch ag wa the	ange ent v is/w e arti	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the State e registered of lability compa of the limited e limited liabil	ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
/s/ Jill Cilmi Signature of a member or authorized representative of a member				Printed or typed name of signee
I i	here ovisi e obi	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, in the writing of this change.	Sofboration c	his capacity. I further agree to comply with the of my duties, and I am familiar with and accept the 605, F.S. Or, if this document is being filed in that the limited liability company has been service Company
Si	gnan	ire of Registered Agent		•