M13000006109

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: 120000000088 June 02, 2017 Date:_ Michelle Walker Name:_ C019107 Reference #:___ CORDOVA REGENCY, LLC Entity Name:____ Articles of Incorporation/Authorization to Transact Business Amendment ✓ Change of Agent Reinstatement Conversion Merger Dissolution/Withdrawal] Fictitous Name ∐ Other Please include a copy of cover letter with returned evidence. Thanks! Authorized Amount: 525

Signature: Michelle Walker Please note: If authorized amount is incorrect, please call Michelle at 518-213-0737.

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.

outing in the state by a fortuna.		
1. Name of the limited liability company: CORDOVA	REGENCY, LLC	
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 1247 Waukegan Rd Suite 200	
	Glenview, IL. 60025	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1247 Waukegan Rd Suite 200	
(1700; MIII 921 001 011100 2011)	Glanview, IL 60025	
September 26, 2013	M13000006109	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	C T CORPORATION SYSTEM	
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD	
	PLANTATION, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
<u>NEW</u> Registered Agent:	COGENCY GLOBAL INC.	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	115 North Calhoun St., Suite 4	
IMUST BE TECKIDA STREET ABOKESS	Tallahassee 323 323 1	
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 office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of	
Alan Pollack		
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 I amiliar with and accept the obligations of my portugate of the first occument is being filed to me address I hereby confirm that the limited liability company	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.	
Stoneture of Porteland Arout		

Signature of Registered Agent Sean Honan, Assistant Secretary

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

INHS18 (12/13)