M1400000 3699

(Requestor's Name)							
(Address)							
(Address)							
(Cit	y/State/Zip/Phone	e #)					
PICK-UP	WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	_ Certificates	s of Status					
Special Instructions to Filing Officer:							





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06/21/16--01029--021 **25.00

16 JUN 21 PH 2: 50
SECRETARY OF STATE

J. HARRIS



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: June 17, 2016

Order#: 166480-014

Re: RENT RECOVER OF BETTER NOI LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

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: RENT F	RECOVE	R OF BE	TTER NO	I LLC	
2. (a)		220 GERRY DRIVE Principal office address of limited liability companies: MUST BE STREET ADDRESS)		_ (b)		-	f limited liability company: E POST OFFICE BOX)
		WOOD DALE IL 60191	1	_			
_		05/23/2014		_	M140000		
3.		Date of filing/registration in Florida		4.		Document nur	mber
5.	(a)	CT CORPORATION SYSTEM				_	
		Registered Agent and Registered Office shown on the re	ecords of th	e Florida	Dept. of State	e:	
		1200 SOUTH PINE ISLAND ROAD					
		Registered Office Address (MUST BE FLORIDA S	TREET A	DDRESS)		-	
		PLANTATION	, FL_	33324		-	16 J
(b)		Corporation Service Company				_	CRETA IN
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Ro</u>	<u>egistered C</u>	Office add	ress:		- SEX - 1
		1201 Hays Street				_	PM 2: 50
		NEW Registered Office Address:					SO ATE ATE
		Tallahassee	FI.	32301		-	
- 0 -					·	-	
the age was	chai nt w s/we	mited liability company is not organized unde nge or changes are made, the Florida street add vill be identical. Or, in the case of a Florida ling re authorized by an affirmative vote of the me cles of organization or the operating agreemen	dress of the mited liab embers of	he regist pility cou the limi	ered office npany, it is ted liability	e and the busine s hereby confir y company or a	ess office of the registered med that the change(s)
		Xee & Conec		Jill C	ilmi Author	rized Person	
		ure of a member or authorized representative of a member			···-	Printed or typed	
I h pro the to n not	ereb visio obli nere ified	by accept the appointment as registered agent ons of all statutes relative to the proper and co- gations of my position as registered agent as p ly reflect a change in the registered office add in writing of this change.	and agred omplete p provided iress, I hë	e to act i erforma for in Ci ereby co	in this cape nce of my c hapter 605 nfirm that	acity. I further duties, and I an i, F.S. Or, if thi the limited liab	agree to comply with the n familiar with and accept is document is being filed vility company has been
Sign	natur	e of Registered Agent Corporation Service Com		BY: Gr	ace E. Kir	rhy Assistant	Vice President