M14000007243

(Requestor's Name)								
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(Address)								
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(City/State/Zip/Phone #)								
(e.ty/seata/2.p// none //)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
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10/04/16--01031--015 **25.00

2016 OCT -4 PM 5: 02

K. SALY OCT - 6 2016



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: September 30, 2016

Order#: 296680-074

Re: BKD CCRC OPCO HOLDCO MEMBER, 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: Mary Rivers

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: BKD CCRC C	OPCO HOL	DCO MEM	IBER, LLC			
2.	(a) .	111 WESTWOOD PLACE SUITE 400 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		BRENTWOOD FL 37027						
_		10/07/2014		M140000				
3.		Date of filing/registration in Florida	4.		Document numbe	: r		
5.	(a)	C T CORPORATION SYSTEM						
		Registered Agent and Registered Office shown on the records	Dept. of Stat	te:				
		1200 SOUTH PINE ISLAND ROAD						
		Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	1	_			
		PLANTATION ,1	FL <u>33324</u>		-	HVTTV	2016 OCT	17
	(b)	Corporation Service Company					1	, Die
	(0)	Enter name of NEW Registered Agent and/or NEW Register	red Office add	lress:	_			
		1201 Hays Street				T S S S	PK 5: 03	SA PAT
		NEW Registered Office Address:	•		_	And Annual Control of the Control of	03	
		Tallahassee,	FL <u>32301</u>		-			
the age the	e cha ent we is/we arti	imited liability company is not organized under the inge or changes are made, the Florida street address vill be identical. Or, in the case of a Florida limited creauthorized by an affirmative vote of the member clesses organization or the operating agreement of the unit of a member or authorized representative of a member by accept the appointment as registered agent and a const of all statutes relative to the proper and complete	of the regis liability cors of the limited lim	tered officempany, it is ited liability con Cilmi, Authority in this car	te and the business is hereby confirmed ty company or as of mpany. Description of typed name of the confirmed or typed name of	office of d that the therwise	f the rege change provid	gistered ge(s) led in
no		ons of all statutes relative to the proper and completing a statute of the proper and completing at the proper and completing at the registered agent as proving the reflect a change in the registered office address, in writing of this change. The of Registered Agent Corporation Service Company	7		5, F.S. Or, if this d the limited liability irby, Assistant Vic			ng filed been
		Division of Cornerations P O	Roy 6327	■ Tallaha	econ EI 32314			

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