M1400007733

	(Re	equestor's Name)	
	(Ác	ldress)	
	(Ac	idress)	<u> </u>
	(Ci	ty/State/Zip/Phone	e #)
	PICK-UP	WAIT	MAIL
	(Bu	isiness Entity Nam	ne)
	(Dc	ocument Number)	
Certified C	opies	_ Certificates	of Status
Special Ir	nstructions to	Filing Officer:	
	PENNI' 11/21/2		
	1/21/2	Office Use Onl	~ <u>~</u> ~

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SECRETARY OF STATE

NECEVED



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.

(a)		(b)	
	Principal office address of limited liability company (<u>Note: MUST BE STREET ADDRESS</u>)	:	Mailing address of limited liability company. (<u>Note: MAY BE POST OFFICE BON</u>)
	7750 WISCONSIN AVENUE	77	250 WISCONSIN AVENUE
	Bethesda, MD 20814	Be	ethesda, MD 20814
	10/23/2014	M14	4000007733
	Date of tiling/registration in Florida	4.	Document number
(a)	Registered Agent and Registered Office shown on the record C T CORPORATION SYSTEM	ds of the Florida De r	- 2 6
	Registered Office Address (MUST BE FLORIDA STR	FET ADDRESS	
	1200 S PINE ISLAND RD	<u>LET ANJORESSY</u>	
(b)	1200 S PINE ISLAND RD	FL_33324	COF STATE
(b)	1200 S PINE ISLAND RD PLANTATION	FL_33324	COF STATE
(b)	1200 S PINE ISLAND RD PLANTATION Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>	FL_33324	COF STATE
(b)	1200 S PINE ISLAND RD PLANTATION Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	FL_33324	COF STATE

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Andrew P.C. Wright	Andrew P.C. Wright, Authorized Person	
Signature of a member or authorized representative of a member	Printed or typed name of signee	
I hereby accept the appointment as registered agent and agi	ree to act in this capacity. I further agree to compl	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

nace C.K. bi

GRACE E. KIRBY, ASST. VICE PRESIDENT

Signature of Registered Agent

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