M1500000 1082

. (Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to	Filing Officer:			

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JUL 12 **2016** S. Young



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith JANIS.SMITH@CSCGLOBAL.COM

Date: July 7, 2016

Order#: 198706-090

Re: SILVERTREE SENIORS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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: Janis M. Smith

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.

QUCA.XCOA

SECRETARY OF STAILS TALLAHASSEE, FLORID

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.	Nä	me of the limited liability company: SILVER	RTREE SENIOR	S, LLC		
2	(a)	6060 Poplar Ave.	(b) 6060 Po	oplar Ave.	
2.	(4)	Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	pany:	M	(Ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Ste. 425		Ste. 425		
		Memphis, TN 3811	9	Memphis,	TN 38119	
•		02/02/2015		M1500000	1082 Document number	
3.		Date of filing/registration in Florida	4.	J.	Document number	
5.	(a)	National Corporate Research, Ltd., Inc.				
		Registered Agent and Registered Office shown on the	ecords of the Florid	a Dept. of State:	, 19 ² -0 !	
		115 North Calhoun St.	· - · <u>· · · · · · · · · · · · · · · · ·</u>			
		Registered Office Address (MUST BE FLORIDA S	STREET ADDRES	<u>s)</u>		1 1'-
		Suite 4			12 SSE	<u> </u>
		Tallahassee	, FL <u>3230</u>	1	PH CFF	C
	(b) .	Corporation Service Company		<u> </u>	ICRETARY OF STAIDA	4 > - - -
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW R</u>	egistered Office ad	aress:		
		1201 Hays Street				
		NEW Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	***		
		Tallahassee	, FL <u>3230</u>			
the ago wa	char ent w s/we	mited liability company is not organized undenge or changes are made, the Florida street ad ill be identical. Or, in the case of a Florida lire authorized by an affirmative vote of the mecles of organization or the operating agreemen	dress of the regi mited liability c mbers of the lin	stered office a ompany, it is l nited liability liability comp	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.	
				Jame	s Carmichae Authorized Pe	erson
S	ignati	ure of a member or authorized representative of a memb	er	Ţ	Printed or typed name of signee	
I h pro the to i not	ereb ovisio obli nere ified	y accept the appointment as registered agent ons of all statutes relative to the proper and co gations of my position as registered agent as ly reflect a change in the registered office add in writing of this change.	and agree to ac omplete perform provided for in dress, I hereby c	t in this capac ance of my di Chapter 605, . onfirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been	
Sig	natur	Loge CKOOL e of Registered Agent Corporation Service Con	npany BY: C	race E. Kirb	y, Assistant Vice President	

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