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From:

Account Name : C T CORPORATION SYSTEM

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## LLC REGISTERED AGENT CHANGE DOC-3602 KYOTO GARDENS DRIVE MOB, LLC

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To:

## 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.

I. N	ame of the limited liability company: DOC-3602 KYOT	TO GARI	DENS DRIV	/E MOB, LLC	
2. (a)	4600 South Syracuse Street	(h	(b) 4600 South Syracuse Street		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0	·,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Suite 500		Suite 500		
	Denver, CO 80237	_	Denver, C	O 80237	
	08/10/2015		M1500000	6301	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	SPLAGENT SOLUTIONS, INC.				
≥. (u)	Registered Agent and Registered Office shown on the records of t	the Florida	Dept. of Stat	– le:	
	1540 GLENWAY DR.				
	Registered Office Address MUST BE FLORIDA STREET A	DDRESS.	<u> </u>	_	
				20	
	TALLAHASSEE , FL	32301		2024.	
	C.T. Corporation System				
(b)	Enter name of NEW Registered Agent and/or NEW Registered	^	<del></del>		
	Enter name of NEW Registered Agent and/or NEW Registered	<u>Office add</u>	<u>lreys</u> :	<del>-0</del> :	
				P: 12:	
	NEW Registered Office Address:			<del>-</del>	
	1200 South Pine Island Road				
	Plantation	33324		-	
	,FL_		<u>.</u>	-	
the cha agent v was/we the arti	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the latenta. Pictor.	the regis bility con f the limi limited li	tered office mpany, it is ted liabilit ability con	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
Signat	ture of a member or authorized representative of a member			Printed or typed name of signee	
provist the obl to merc notified By: 8	ny accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have the composition of this change.  CT Corporation System  SNL EMERICA ASSISTANT SECRETARY  TO Registered Agent	performa I for in (, ereby co.	in this cap ince of my hapter 6(); nfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	