Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000393811 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 Phone 407-540-7576 Fax Number 407-641-8361

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

susana.carcasona@cnl.com Email Address:\_\_\_\_

## LLC REGISTERED AGENT CHANGE CHP YAKIMA WA II JV MEMBER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

Y SULKER

OCT 25 2021

H21000393811 3

## 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: CHP Yakima V	VA II JV	Mem	ber, LLC	3			
2. (a)			(h)					
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-).		Mailing addres	s of limited liab Y BE POST OF		
	450 S. Orange Avenue, 14th Floor		I	P.O. Box	4920			
	Orlando, FL 32801		(	Orlando,	FL 32802-492	0		
	09-17-2015		M	1500000	07424			
3.	Date of filing/registration in Florida	4.			Document i	number		
5. (a)								
()	Registered Agent and Registered Office shown on the records of Amy J. Patterson	of the Flor	ida D	ept. of Sta	ale:			
	Registered Office Address (MUST BE FLORIDA STREET	T 4000E	CCI		_			
	450 S. Orange Avenue				_			
	Orlando, F	32801			_			
(b)	Enter name of NEW Registered Agent and/or NEW Registers Tracey B. Bracco	ed Office	nddre	<b>:</b>	•	LLAHAS	2021 001 22	Catalian Catalian
	NEW Registered Office Address:				-	(S)	P	
	450 S. Orange Avenue, 14th Floor			<b></b>	•	EE, FI	PM 1: 3	D
	Orlando	32801				E	36	
hange igent v vas/we	imited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members cless of organization or the operating agreement of the	e registe iability of of the li	red o comp mited liab	office an any, it i d liabilit ility cor	nd the busines is hereby con- ty company of mpany.	is office of the firmed that the	ie regist ie chan	tered ge(s)

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