

10/22/21, 10:52 AM

Division of Corporations  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

**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.

(((H21000393840 3)))



H210003938403ABC/

**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.**

Email Address: susana.carcasona@cnl.com

**LLC REGISTERED AGENT CHANGE  
 CHIP YAKIMA WA II OWNER, LLC**

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

Electronic Filing Menu

Corporate Filing Menu

Y SUBMIT

OCT 25 2021

FILED

2021 OCT 22 PM 1:29

SECRETARY OF STATE  
TALLAHASSEE, FL2021 OCT 22 AM 11:36  
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED  
DATE 10/22/21 BY 60322

H21000393840 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.

1. Name of the limited liability company: CHP Yakima WA II Owner, LLC
2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
450 S. Orange Avenue, 14th Floor  
Orlando, FL 32801  
09-17-2015
- (b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
P.O. Box 4920  
Orlando, FL 32802-4920  
MI5000007450
3. Date of filing/registration in Florida
4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Amy J. Patterson  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
450 S. Orange Avenue  
Orlando, FL 32801
- (b) List name of NEW Registered Agent and/or NEW Registered Office address:  
Tracey B. Bracco  
NEW Registered Office Address:  
450 S. Orange Avenue, 14th Floor  
Orlando, FL 32801

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.

Signature of a member or authorized representative of a member

Tracey B. Bracco

Printed or typed name of signer

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.

Signature of Registered Agent

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

H21000393840 3