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(Business Entity Name)									
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A BUTLER JAN 19 2023 CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195									
REFERENCE : 344563 5042714									
AUTHORIZATION: Conclude man									
COST LIMIT : \$ 25.00									
ORDER DATE : January 11, 2023									
ORDER TIME : 1:55 PM									
ORDER NO. : 344563-028									
CUSTOMER NO: 5042714									
CHANGE OF AGENT									
NAME. IMA DIVERGIDE II.C									
NAME: HTA-RIVERSIDE, LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Alexxis Weiland									
EXAMINER'S INITIALS:									

## 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.	Na	me of the limited liability company: HTA	-RIVERSIDI	E, LLC 					
2	(a)	16435 North Scottsdale Road, Suite 320							
	(u)	Principal office address of limited liability c (Note: MUST BE STREET ADDRES		_	M	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Scottsdale, AZ 85254		<del>-</del> -					
		08/29/2016		М	16000006	985			
3.		Date of filing/registration in Florid	da	4.	ī	Document nu	mber		
5	(0)	C T Corporation System							
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1200 South Pine Island Road				2023 JAH			. s = + . i)
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					::	<u> </u>	, l
		Plantation	, FL_	33324			or si		ر بر العبيس توسيد ا
	(b)	Enter name of NEW Registered Agent and/or NEW  Corporation Service Company			<u>'sss</u> :		富	ω	
		NEW Registered Office Address:		<del>-</del>					
		1201 Hays Street							
		Tallahassee	, FL_	32301					
cha age	inge ent w s/we	mited liability company is not organized un or changes are made, the Florida street add vill be identical. Or, in the case of a Florida re authorized by an affirmative vote of the cles of organization or the operating agreen	ress of the r limited liab members of	egistered of oility comp othe limited	office and pany, it is l d liability	the business hereby confir company or a	office of the med that th as otherwise	e registi e chang	ered ge(s)
1	s/ Ji	ll Cilmi		Jill Cil		rized Person			<u>_</u>
	_	ure of a member or authorized representative of a me				Printed or typed			
pro the to i	visio obli nere	y accept the appointment as registered age ons of all statutes relative to the proper and gations of my position as registered agent a ly reflect a change in the registered office a lin writing of this change.	compiete p as provided address, I hë	e to act in erformanc for in Cha ereby confi rporation	e oj nivat pter 605, rm that th	ries, and ran F.S. Or, if the e limited liab	agree to con In familiar vis documen Ility compa	omply w with and it is bein iny has	vith the l accept ng filed been
		e of Registered Agent		•		Vice Presid	lent		