

10/10/22, 5:42 PM

Division of Corporations

M17000003143

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (954)208-0845
Fax Number : (614)573-3995

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

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2022 OCT 11 AM 10:06

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**LLC REGISTERED AGENT CHANGE
CP MOB 2017, LLC**

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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T. LEMIEUX

OCT 12 2022

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, submit 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: CP MOB 2017, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

2001 Ross Avenue Suite 3400

Dallas, TX 75201

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

2001 Ross Avenue Suite 3400

Dallas, TX 75201

04/12/2017

MI7000003143

3. Date of filing/registration in Florida

4. Document number

5. (a) CAPITOL CORPORATE SERVICES, INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

515 EAST PARK AVENUE 2ND FL

TALLAHASSEE

FL 32301

C T Corporation System

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1200 South Pine Island Road

Plantation

FL 33324

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

Jason W. Geer, Vice President

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.

By: Mark Holloway
C T Corporation System

Signature of Registered Agent

Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00