002/6/

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	- -
(C	ity/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(B	usiness Entity Nam	e)
(D	ocument Number)	
.i Copies	Certificates	of Status
al Instructions to	Filing Officer:	
	Office Use Onl	v



800398468628

2023 JAN 17 PH 2: 36

RECEIVED

2023 JAN 17 PH 4: 08

A. BUTLER JAN 18 2023 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO	· :	12000000	0195				
REFERENC	E :	344563	5042714				
AUTHORIZATIO	N :	multie	Ceral.				
COST LIMI	T :	\$ (25.00					
ODDED DATE . January 11 20	23			·			
ORDER DATE : January 11, 20	23						
ORDER TIME : 1:56 PM							
ORDER NO. : 344563-103							
CUSTOMER NO: 5042714							
CHANGE OF AGENT							
NAME: HTA-WESLEY CHAPEL MOB, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Alexxis Wei		ver's ini					

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. 1	Name of the limited liability company:	Y CHAPE	L MOB, LL	С	
2. (a	16/35 North Scottsdale Road, Suite 320				
z. (a	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Scottsdale, AZ 85254		-		
	06/02/2017		M170000	04751	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	C T Corporation System				
J. (c	Registered Agent and Registered Office shown on the records of	of the Florid	la Dept. of Sta	ate:	
	1200 South Pine Island Road			202	
	Registered Office Address (MUST BE FLORIDA STREE	2023 JAN 17			
	Plantation, F	-I33324	1		
(b <u>]</u>	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> . Corporation Service Company	ed Office no	ddress:	- 1 3 5 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	
	NEW Registered Office Address:			_	
	1201 Hays Street			_	
	Tallahassee, F	32301		_	
chang agent was/v	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited layere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	aws of the ne register liability co	State of Fled office and office a	lorida, it is hereby confirmed that after the nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
	Jill Cilmi	Jill ——	Cilmi, Auth	norized Person	
_	ature of a member or authorized representative of a member		a to alot	Printed or typed name of signee	
provis the ob to met	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complet oligations of my position as registered agent as provid rely reflect a change in the registered office address, f ed in writing of this change.	e perform led for in (l hereby c	ance of my Chapter 60: onfirm that	pacity. 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 a Company	
	C_{0} , O_{0} C_{0}	•		st. Vice President	