## M1700000 9639

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Dusiness Estity Name)							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
•							

Office Use Only



200319182362

10/03/18--01015--010 \*\*25.00

2018 OCT -3 AM 9: 45
SECRETARY OF STATE
TALLAHASSEE EATE

Merson &



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: October 1, 2018

Order#: 419549-092

Re: CPF SENIOR LIVING ACQUISITIONS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 $\overline{XX}$  Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## \* 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.

ì.	Na	me of the limited liability company:CPF SENIOR LI	IVING A	ACQUISITIO	ONS, LLC			
2.	(a)	980 N. Michigan Avenue, Suite 1998	(b	o)				
	` /	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	- `		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
		Chicago, IL 60611	<del>-</del> -					
		11/14/2017		M170000	09639			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	C T Corporation System						
	(**)	Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of Stat	<del>-</del> e:			
		1200 South Pine Island Road						
		Registered Office Address (MUST BE FLORIDA STREET A.	DDRESS	<u>, , , , , , , , , , , , , , , , , , , </u>	_	ep.	20	
						Ă.:	381	42874
		Plantation .FL	33324	l	-	HAA MARK	2018 OCT -3	
	0.5	Corporation Coming Comments				28.5 28.00		m
	(b)	Corporation Service Company  Enter name of NEW Registered Agent and/or NEW Registered Office address:			-	SEE S		
						끝	5 <sup>†</sup> 15	
		1201 Hays Street			_	FA	<i>3</i> 1	
		NEW Registered Office Address:						
					_			
		Tallahassee , FL_	32301		_			
the ag wa	e cha ent w as/we	mited liability company is not organized under the law- nge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	he regis bility co `the lim	stered office ompany, it i sited liabilit	e and the business o s hereby confirmed y company or as oth	ffice of that the	the regi change	stered (s)
/	s/ Jay	Flatt	Jay	Flatt, Autho	orized Person			
	Signat	ure of a member or authorized representative of a member			Printed or typed name	of signee		
pr thi to	ovisi 2 obli mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address. I ha I in writing of this change.	e to act perform for in ( ereby co	in this cap ance of my Chapter 605 onfirm that	acitv. I further agreduties, and I am fan S. F.S. Or, if this do the limited liability	ze to con niliar wi cument compan	nply wi th and i is being y has b	th the accept g filed een
Si	gnatui	re of Registered Agent Corporation Service Company	BY: A	mi M. Cas	sper, Asst. Vice Pre	esident		

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