Division of Corporations

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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

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Account Name : NATIONAL CORPORATE RESEARCH, LTD.

Account Number : I20000000088 Phone : (800)221-0102

Fax Number : (212)564-6083

## REGISTERED AGENT CHANGE

HCPIII WOODBRIDGE, INC.

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## Florida Department of State, Sandra B. Mortham, Secretary of State

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502 undersigned corporation organized under the laws of the s	State of Florida
<ul> <li>submits the following statement in order to change its registrate of Florida.</li> <li>1. The name of the corporation is: HCPIN WOODBRID</li> </ul>	
2. The mailing address of the corporation is: -10065 RED I	RUN BLVD., OWINGS MILLS, MD-21117
910 PIDGEBROOK PD, SPARKS	, MD ZISZ
3. Date of incorporation/qualification: 10/16/1995	Document number: P95000080227
4. The name and address of the current registered agent and	office:
C T CORPORATION SYSTEM	SEC SECTION
1200 SOUTH PINE ISLAND ROAD	AR R
PLANTATION, FL 33324	SSE - III
5. The name and address of the new registered agent and of	Fice: (P. O. Box Not Acceptable)
NATIONAL CORPORATE RESEARC	H. LTD., INC.
1406 Hays Street, Suite #2, Tallaha	- Uni
The street address of its registered office and the street adagent, as changed, will be identical.	ldress of the business office of its registered
Such change was authorized by resolution duly adopted by authorized by the board,	y its board of directors or by an officer so
11058/	4-10-2000
(Signature of an officer, chairman or vice chairman of the	ooard) (Date)
Melissa Warlow, Vice President	
(Printed or typed name and title)  Having been named as registered agent and to accept set corporation, I hereby accept the appointment as registered in the provisions of all statute performance of my duties, and I am familiar with and acceptioned agent.	(Date)  rvice of process for the above stated  ed agent and agree to act in this capacity.  es relative to the proper and complete  cept the obligation of my position as
22	4/14/00
(Signature of Registered Agent)	(Daic).
If signing on behalf of an entity:  John L. Morrissey	A 477
(Typed or Printed Name)	Asst. Vice President (Capacity)
CR2E045(4/95)	FILING FEE: \$35.00