

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M17000004753

Entity Name: HTA-KISSIMMEE HOSPITAL MOB, LLC

Current Principal Place of Business:

16435 N. SCOTTSDALE ROAD, SUITE 320
SCOTTSDALE, AZ 85254

Current Mailing Address:

16435 N. SCOTTSDALE ROAD, SUITE 320
SCOTTSDALE, AZ 85254 US

FEI Number: 38-4038666

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title SOLE MBR
Name HEALTHCARE TRUST OF AMERICA
 HOLDINGS, LP
Address 16435 N. SCOTTSDALE ROAD, SUITE
 320
City-State-Zip: SCOTTSDALE AZ 85254

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDSAY A CDEBACA

TAX MANAGER

03/15/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date