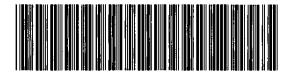
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3 MASON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard

lindsey.lockard@cscglobal.com

Date: December 24, 2015

Order#: 922383/135

Re: TANDEM REGIONAL MANAGEMENT OF FLORIDA, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

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

INCA.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

		mpany: TANDEM REGIONAL MANAGEMENT OF FLORIDA, LLC (b) 3820 Mansell Road					
2. (a)		(b	<i>,</i>				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		N	-			oility company: FICE BOX)
	Suite 280		Suite 280			-	
	Alpharetta, GA 30022	<u>-</u>	Alpharett	a, GA 30	0022		
	11/19/2008		L0800010	8271			
3.	Date of filing/registration in Florida	4.		Docume	ent numbe	er	····
e (-)	C T Corporation System						
5 (a)	C T Corporation System Registered Agent and Registered Office shown on the records of	f the Florida	Dept of State	.•			
		r the r lorida	Dept. of ource	••			
	1200 South Pine Island Road						
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS	2				
			- 				
	Plantation , F	L 33324					
(b)	Corporation Service Company					(N)	
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office add	iress:				
					E E	030	77
	4004 Have Chrack				55.3	W	**************************************
	1201 Hays Street				ĦĨ.	ö]
	NEW Registered Office Address:			. .	OF ST	آ بب	ED
					ATE	√ 2	
	Tallahassee . F	L 32301	,	-		0	
	,						
lf the l	imited liability company is not organized under the la	ws of the	State of Flo	rida, it i	s hereby	confirm	ned that after
the cha	ange or changes are made, the Florida street address of	of the regis	tered office	and the	business	office	of the register
agent v	will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members	of the lim	mpany, 11 18 ited liability	nereby	confirme	a inai i therwi	ine change(s) se provided in
	icles of organization or the operating agreement of the				ny or as c	tiller ** i.	se provided in
			-		d Dorson		
Siona	gnatule of a member or authorized representative of a member			Authorized Person Printed or typed name of signee			
_			1 .			_	
I here provis the ob to mer notifie	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, if d in writing of this change.	e performe ed for in C hereby co	in this capa ance of my o Chapter 605 onfirm that t	acity. I f luties, ai , F.S. O the limit	further ag nd I am fo r, if this o ed liabilit	ree to camiliar docume by comp	comply with the with and access on the being file coany has been
7	Lucles ax lan	7					
Signafi	re of Registered Agent						

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

INHS18 (2/14)

By: Elizabeth A. Dawson, Asst. Vice President