ADMINISTRATION INC OTH FL 2536 COUNTRYSIDE BLVD CLEARWATER FL USA 33765 MH00004488172

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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(Corporation Name)	(Document #)	• • • • •
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(Corporation Name)	(Document #)	
4	A CONTRACT OF THE PROPERTY OF	<u> </u>
(Corporation Name)	(Document #)	
☐ Walk in ☐ Pick up tim	e Certified Copy	. 20
☐ Mail out ☐ Will wait	Photocopy Certificate of Status	
NEW FILINGS	AMENDMENTS ORDER	.
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	
	Examiner's Initials	

CR2E031(7/97)

Statement of Change of Registered Office or Registered Agent or Both For Limited Liability Company

Pursuant to the Provisions of sections 608.416 or 608.508, Florida Statues, 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. The name of the limited liability company is: Ameri-Life Health Services of North Florida, LLC
- 2. The mailing address of the of the limited liability company:

2536 Countryside Blvd 6th Floor Clearwater, FL 33763

- 3. Date of Filing/registration in Florida: 9/6/00
- 4. Document number: M00000001890
- 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Kimberly J. Haikara 2536 Countryside Blvd 6th Floor Clearwater, FL 33763

6. The name and address of the new registered agent and or office:

Robert Harry Shatanoff 2536 Countryside Blvd. 6th Floor Clearwater, FL 33763

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability Company or otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

Robert H. Shatanoff, L.L.C. Manager

(Printed or Typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statues relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agents provided for Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Robert Harry Shatanoff (Signature of Registered Agent)