## P04000141028

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ACCOUNT NO. : I2000000195						
REFERENCE : 577445 4337669						
AUTHORIZATION : South of						
COST LIMIT : \$3500						
ORDER DATE: March 20, 2013						
ORDER TIME : 12:34 PM						
ORDER NO. : 577445-015						
CUSTOMER NO: 4337669						
CHANGE OF AGENT						
NAME: NORTH FLORIDA BEHAVIORAL HEALTH PARTNERS, INC.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Susie Knight EXT# 52956						
EXAMINER:						

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

statement o	the provisions of sections 607.0502, 617.050 f change is submitted for a corporation orga order to change its registered office or regist	nized under the laws of the	e State of Florida		
	e of the corporation: NORTH FLORIDA BEH				
2. The princ	cipal office address: 8906 Brittany Way, Tam	npa, FL 33619			
3. The mail	ing address (if different): 240 Corporate Blvd	d., Norfolk, VA 23502			
4. Date of in	ncorporation/qualification: 10/08/1998	Document number:	P04000141028		
	e and street address of the current registered a Department of State: (If resigned, enter resign	-	on file with the		
	Russell Morgan				
	8906 Brittany Way			🖁 ಪ	
	Tampa, FL 33619			APR	
6. The name (if change	e and street address of the new registered age ed):	ent (if changed) and /or reg	gistered office		m
	Corporation Service Company			Š	
	1201 Hays Street			et 8:	
	P.O. Box NO.	Гассернавіс			
	Tallahassee, FL 32301				
The street a as changed	address of its registered office and the street will be identical.	address of the business o	office of its regist	ered agen	t,
Such chang authorized	te was authorized by resolution duly adopted by the board, or the corporation has been no	d by its board of directors of the ch	or by an officer nange.	so	
<u></u>	ignature of an officer or director	ROBERT C. FLOW Printed or typed	E. VICE PRI	esidea	17
I further ag performanc avent. Or.	cept the appointment as registered agent an tree to comply with the provisions of all stat te of my duties, and I am familiar with and c if this document is being filed merely to refi firm that the corporation has been notified i ation Service Company	tules relative to the prope accept the obligation of m lect a change in the regist	acity, r and complete ry position as reg lered office addri	gistered ess, I	
Ву:	and Service Company	4/4/	243		
<u></u> (A	Signature of Registered Agent	Date	e	· · · · · · · · · · · · · · · · · · ·	
If signing o	on behalf of an entity:				
Elizabeth A	A. Dawson, Asst. Vice President				
	Typed or Printed Name				

\* \* \* FILING FEE: \$35.00 \* \* \*