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(((H04000247121 3)))

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## REGISTERED AGENT CHANGE

VHA INC.

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## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 15, 2004

VHA INC. 220 E LAS COLINAS BLVD IRVING, TX 75039US

SUBJECT: VHA INC. REF: P07839

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Irene Albritton Document Specialist FAX Aud. #: H04000247121 Letter Number: 604A00069940

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

this statement of	change is submitte	ed for a corporation	7.0502, 607.1508, or 617.1508, a organized under the laws of the	State of
Delaware of Florida.	in order to t	change its registere	d office or registered agent, or	DOIN, IN INC SINIE
-	he corporation:	HA Inc.		
	_	20 East Las Colinas I	Nvd.	
Tr. Transfer		irving, Texas 75039	<u> </u>	
2 The mailine o	ddress (if different		,	
o. The mailing a	omess (or different	J		E T
4. Date of incom	oration/qualificati	on: 10/23/85	Document number: Po	7839
	i street address of t tment of State:	he current registere	d agent and registered office on	file with Fig. 12
	THE PRE	NTICE HALL CORP	DRATION SYSTEM, INC	- 55
_		1201 HAY	S ST.	
_		TALLAHASSE	E PL 32301	•
6. The name an changed):	d street address of	the new registere	d agent (if changed) and /or re	gistered office (if
_		olo C T Commen	Come Constant	
c/o C T Corporation System (P.O. Box or personal mailbox NOT accomple)				
_	1200 So	uth Pine Island Road,	Plantation, Florids 33324	
The street addre	ss of its registered d will be identical	office and the stree	et address of the business office	of its registered
			ed by its board of directors or b notified in writing of the change	
	e goard, or the cor	poration has been i	noutied in writing of the change Kimberly Beggett,	president
(Jingstore of an officer,	chairpals of vice chairman		(Printed or typed name and total	
I hereby accept I further agree t performance of registered agent office address, I	the appointment a o comply with the my duiles, and I ai . Or, if this docum hereby confirm th Comparation System	s registered agent a provisions of all st n familiar with and tent is being filed n at the corporation	and agree to act in this capacity autes relative to the proper and I accept the abligation of my po nerely to reflect a change in the has been notified in writing of t	i d complete sition as registered his change
By	1		12/14/14	
(8)	mature of Registered Agen	6)	(Ditt) / 27	
If signing on behalf	•			
	Michael E. Jones  ped or Printed Name)		Michael E. Jones	
<b>1.4.</b>	(F TO BERTAND LANGUE)		Assistant Becretary	ī

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

Make Checks payable to Florida Department of State and Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314