| Current M | lailing Address: | |
|------------------------|--|--|
| | H WALLIS ROAD SOUTH TE, LA 70508 US | |
| FEI Number: 20-1497787 | | Certificate of Status Desired: No |
| Name and | d Address of Current Registered Agent: | |
| 115 NORTH SUITE 4 | GLOBAL INC. I CALHOUN ST. SEE, FL 32301 US | |
| The above na | med entity submits this statement for the purpose of changin | g its registered office or registered agent, or both, in the State of Florida. |
| SIGNATU | RE: RYAN TAYLOR | 05/01/20 |
| | Electronic Signature of Registered Agent | Date |
| Authorize | ed Person(s) Detail : | |
| Title | MANAGER | |
| Name | LHC GROUP, INC. | |
| Address | 901 HUGH WALLIS ROAD SOUTH | |

City-State-Zip: LAFAYETTE LA 70508

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: DONALD D. STELLY

PRESIDENT

05/01/2019

DOCUMENT# L08000043051

Entity Name: HOME HEALTH AGENCY - CENTRAL PENNSYLVANIA, LLC

Current Principal Place of Business:

901 HUGH WALLIS ROAD SOUTH LAFAYETTE, LA 70508

05/01/2019 Date

FILED May 01, 2019 **Secretary of State** 7917501730CC

Electronic Signature of Signing Authorized Person(s) Detail

Date