Entity Name: CARESOUTH HHA HOLDINGS OF NORTH FLORIDA, LLC

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

690 SOUTHPOINT DR NORTH STE 300 JACKSONVILLE, FL 32216

DOCUMENT# M12000003402

Current Mailing Address:

PO BOX 200 AUGUSTA, GA 30903-0200 US

FEI Number: 32-0379155

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DR., SUITE A TALLAHASSEE, FL 32301 US Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	GRIFFIN, RICK W	Name	SOUTHERN, JOHN M
Address	1 10TH ST - STE 500	Address	1 10TH ST - STE 500
City-State-Zip:	AUGUSTA GA 30901-0103	City-State-Zip:	AUGUSTA GA 30901-0103
Title	MGR		
Title	MGR		
Name	JUBEIR N, MAHER A		
Address	1 10TH ST - STE 500		
City-State-Zip:	AUGUSTA GA 30901-0103		

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.

CFO

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Jan 09, 2014 Secretary of State CC6749729497