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Division of Corporations

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FEB 0 8 2018

Account Name : ROGERS, TOWERS, BAILEY, ET AL

Account Number : 076666002273

Phone

: (904)398-3911

Fax Number

: (904)396-0663

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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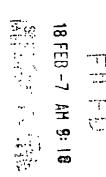
REGISTERED AGENT CHANGE GENESIS HEALTH, INC.

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

ų

1. The name of	Company House		
r. The name of	the corporation: Genesis Health, Inc.	and Tantanavilla FI 2021	
The principal	office address: 3599 University Blvd. So	uth, Jacksonville, PL 32216	
3. The mailing a	address (if different):		
4. Date of incor	rporation/qualification: 4/28/1982	Document number: 763030	
	id street address of the current registered agenurument of State: (If resigned, enter resigned)	at and registered office on file with the	18 18 18 18 18 18 18 18 18 18 18 18 18 1
	Robert H. Pritchard		田田
)	FEB-7	
	Jacksonville, FL 32207		3. 星
6. The name and (if changed):	d street address of the new registered agent (i	f changed) and /or registered office	,
	Beverly A. Pascoe		
	1301 Riverplace Boulevard, Suite 1500		
	Jacksonville, FL 32207		
The street address changed will	ess of its registered office and the street add be identical.	ress of the business office of its registo	ered agent,
Such change we nuthorized by if	as authorized by resolution duly adopted by the board, or the corporation has been notifie	its board of directors or by an officer : d in writing of the change.	50
	ure of an officer of director	ouglas M. Baer, CEO	
hereby accept further agree	t the appointment as registered agent and ag to comply with the provisions of all statutes f my duties, and I am familiar with and accept is document is heing filed merely to reflect of that the corporation has been notified in wi	ree to act in this capacity. relative to the proper and complete	istered ss, 1
E	Beverly Pascoe	2/6/2018	
અછ Signing on be	chalf of an entity:	DIRC	
F	Boulady Pasca		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)