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Ascendia Healthcare Management, Inc. 900004644969--1 -10/19/01--01020--011 15511 N. Florida Avenue Suite D *****35.00 *****35.00 Tampa, Florida 33613 Cityrounoverp Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time _ ☐ Walk in Photocopy Certificate of Status ☐ Mail out Will wait <u>AMENDMENTS</u> **NEW FILINGS** Amendment Profit Profit Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATION OTHER FILINGS Foreign Annual Report ☐ Limited Partnership Fictitious Name Reinstatement Trademark Other

Examiner's Initials

CR2E031(7/97)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the unitersigned corporation organized under the laws of the State of
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Ascendia Healthcare Management, Irc
2. The mailing address of the corporation: 11447 Cronhill Drive, Suite D
A
3. Date of incorporation/qualification:/ February 1, 1999 Document number: D04152294
4. The name and address of the current registered agent and office:
Perry Snyger
4350 W. Cypress Street, Suite 305 = 300
Tamor F 33/07
5. The name and address of the new registered agent (if changed) and/or registered office (if changed)
T. O. DOX MOLECULORIES
_ John Woods, President
John Woods, President 15511 N. Florida Avenue, Sute D
Tampa, FL 33613
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
can connect so
(Signature of an officer, chairman or vice chairman of the board)
John Warde D
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)