





CORPORATION SERVICE COMPANY

CSC - WILMINGTON  
Suite 400  
2711 Centerville Road  
Wilmington De 19808  
800-927-9800  
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: December 7, 2015

Order#: 890053-028

Re: PROMISE HOSPITAL OF LEE, INC.

Enclosed please find:

XX Change of Registered Agent and Office.  
XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.  
XX Issue Proof of Filing.  
XX Please return evidence to the following:

Attn: Lindsey Lockard  
c/o Corporation Service Company  
2711 Centerville Road, Suite 400  
Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

**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, this statement of change is submitted for a corporation organized under the laws of the State of DE in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PROMISE HOSPITAL OF LEE, INC.
2. The principal office address: 999 YAMATO ROAD THIRD FLOOR, BOCA RATON FL 33431
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/07/2003 Document number: F03000000641
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

David J. Armstrong  
999 YAMATO ROAD, THIRD FLOOR  
BOCA RATON FL 33431

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

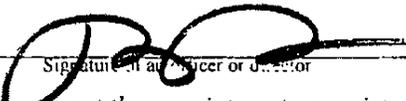
Corporation Service Company  
1201 Hays Street  
Tallahassee FL 32301

P.O. Box NOT acceptable

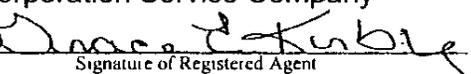
**FILED**  
2015 DEC -9 PM 12:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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, or the corporation has been notified in writing of the change.

 Dona Priebe, Vice President  
Signature of an officer or director Printed or typed name and title

*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 registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

By:  12/07/2015  
Signature of Registered Agent Date

If signing on behalf of an entity:  
Grace E. Kirby, Asst. Vice President  
Typed or Printed Name

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