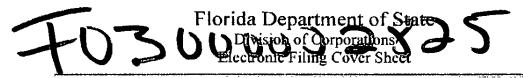
3/24/2017

Division of Corporations



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: C T CORPORATION SYSTEM

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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 KENTUCKIANA COMFORT CENTER, INC.

Certificate of Status	0
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	nange is submitted for a corporation of	.0502, 607.1508, or 617.1508, Florida State rganized under the laws of the State of Kent egistered agent, or both, in the State of Flori	ucky
1. The name of	f the corporation: KENTUCKIANA CO	MFORT CENTER, INC.	
2. The principa	al office address: 2716 GRASSLAND D	PRIVE	
3. The mailing	address (if different):		
4. Date of inco	rporation/qualification: 06/05/2003	Document number: F0300000282	25
	nd street address of the current register artment of State: (If resigned, enter res	red agent and registered office on file with this	7.7
	NRAI SERVICES, INC.		
	1200 S PINE ISLAND RD		27 SSH
	PLANTATION, FL 33324		
6. The name ar (if changed)		agent (if changed) and /or registered office	9: 30 STATE LORID
	C T Corporation System		
	c/o C T Corporation System, 1200 Sou	uth Pine Island Road	
	P.O. Box	NOT acceptable	
	Plantation, Florida 33324		
The street add as changed will	ress of its registered office and the still be identical.	reet address of the business office of its reg	gistered agent,
Such change wanthorized by	was authorized by resolution duly ado the board of the corporation has been	pted by its board of directors or by an offic in notified in writing of the change.	er so
	(nlajini &	Jan Lapinid, Secretary	
I further agree performance o avent Or if ti	of my duitiés, and I ain familiar with a	statutes relative to the proper and complete nd accept the obligation of my position as r reflect a change in the revisiered office ad	registered
CTCo	orporation System	3/21/2017	
	ignature of Registered Agent	Date	
If signing on b	ochalf of an entity:		
Jennifer Quinn,	, Asst. Secretary		
	Typed or Printed Name		
	* * * FILING	FEE: \$35.00 * * *	

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