

FD5000005859

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TALLAHASSEE, FLORIDA

RA Change
T Lewis
12/12/07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Invo Healthcare Associates, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F05000005859

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christian Eubanks

(Name of Contact Person)

National Registered Agents, Inc.

(Firm/Company)

11600 College Blvd., Suite 210

(Address)

Overland Park, KS 66210

(City/State and Zip Code)

For further information concerning this matter, please call:

Christian Eubanks

(Name of Contact Person)

at (913) 754-0637

(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 PA
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Invo Healthcare Associates, Inc.
2. The principal office address: 1780 Kendarbren Dr
Jamison, PA 18929
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/05/2005 Document number: F05000005859
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301-2525

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

NRAI Services, Inc.

2731 Executive Park Drive, Suite 4

(P.O. Box NOT acceptable)

Weston, FL 33331

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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.

[Signature]
(Signature of an officer or director)

Jason Ralph, Vice President
(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.*

NRAI SERVICES, INC
By: Chris [Signature]
(Signature of Registered Agent)

December 5, 2007
(Date)

If signing on behalf of an entity:

Christian Eubanks - Asst. Secretary of National Registered Agents, Inc.
(Typed or Printed Name)

*** 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 (8/05)