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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : 161545 7110150

AUTHORIZATION :

COST LIMIT

ORDER DATE: April 9, 2012

ORDER TIME : 9:27 AM

ORDER NO. : 161545-057

CUSTOMER NO: 7110150

CHANGE OF AGENT

NAME: NATIONAL HEALING HOLDING CORP.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CC CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:



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

ursuant to the provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this tatement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.
The name of the corporation: NATIONAL HEALING HOLDING CORP.
The principal office address: 4850 T-Rex Ave., Suite #300, Boca Raton, FL 33431 US
The mailing address (if different):
Date of incorporation/qualification: 02/07/2007 Document number: F07000000746
The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Hochman, Rodger Esq.
4850 T-Rex Ave. Suite #300
Boca Raton, FL 33431 US
The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporation Service Company
1201 Hays Street
. (P.O. Box NOT acceptable)
Tallahassee, FL 32301
he street address of its registered office and the street address of the business office of its registered agent, changed will be identical.
uch change was authorized by resolution duly adopted by its board of directors or by an officer so athorized by the board, or the corporation has been notified in writing of the change.
Maureen Cathell, Vice President (Printed or typed name and title)
thereby accept the appointment as registered agent and agree to act in this capacity. In the following the properties of all statutes relative to the proper and complete performance in the properties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ocument is being filed merely to reflect a change in the registered office address, I hereby confirm that the proporation has been notified in writing of this change.
By: 04/04/2012
(Signature of Registered Agent) (Date) signing on behalf of an entity:
lizabeth A. Dawson, Asst. Vice President
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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