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| 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 DELAWARE |
| in order to change its registered office or registered agent, or both, in the State of Florida, |
| 1. The name of the corporation: MCRS RECOVERY, INC. |
| 2. The principal office address: 200 E BROWARD BLVD., |
| FORT LAUDERDALE FL 33301 |
| 3. The mailing address (if different): 300 Cran Colony Drive, Suite 203 |
| 4. Date of incorporation/qualification: 02/17/2009 Document number: F0900000635 |
| 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) |
| CORPORATE CREATIONS NETWORK INC. |
| 11380 PROPERTY FARMS ROAD #221E |
| PALM BEACH GARDENS FL 33410 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): REGISTERED AGENT SOLUTIONS, INC. |
| REGISTERED AGENT SOLUTIONS, INC. |
| 155 Office Plaza Dr. Suite A |
| P.O. Box NOT acceptable |
| Tallahassee, FL 32301 |
| 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 of an officer or director Panela Ochs-Piasecki - CFS 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. |
| Signature of Registered Agent Date |
| If signing on behalf of an entity: |
| Art Flores, Asst. Secretary Typed or Printed Name |
| * * * FILING FEE: \$35.00 * * * |