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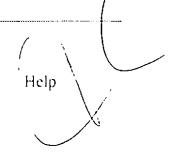
Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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REGISTERED AGENT CHANGE MHA LONG TERM CARE NETWORK, INC.

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, a organized under the laws of the State of Delaward	
		registered agent, or both, in the State of Florida.	
	the corporation: MHA Long Term		
2. The principal FLORHAM PAI	office address: 25-A VREELAND RK, NJ 07932	ROAD, SUITE 200 P.O. Box 789	
3. The mailing a	address (if different):		
4. Date of incoη	poration/qualification: 05/11/2009	Document number: F09000001915	····
	d street address of the current regis rtment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	CORPORATION SERVICE COM	PANY	
	1201 HAYS STREET		2(
	TALLAHASSEE, FL 32301-2525)2:1FF
6. The name and street address of the new registered agen (if changed):		ed agent (if changed) and /or registered office	2024553-6
	United Agent Group Inc.		<u> </u>
	801 US Highway 1		6: 35
P.O. Box NOT acceptable			
	North Palm Beach, FL 33408		
The street addro as changed will	ess of its registered office and the be identical.	street address of the business office of its registe	ered agent,
Such change wa authorized by th	es authorized by resolution duly a ne board, or the corporation has b	idopted by its board of directors or by an officer seen notified in writing of the change.	so
/s/ Tymberlyn Teefey		Tymberlyn Teefey, Attorney-in-Fact	
Signatu	re of an officer or director	Printed or typed name and title	
l hereby accept l furthér agree i of my duties, an docúment is bei corporation has	the appointment as registered ag to comply with the provisions of a d I am familiar with and accept t ng filed merely to reflect a chang s been notified in writing of this c	tent and agree to act in this capacity, all statutes relative to the proper and complete pe he obligation of my position as registered agent, we in the registered office address. I hereby confi- hange.	erformance Or if this rm that the
/s/	Tymberlyn Teefey	02/06/2024	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Tymberlyn Teefe	ey, Special Secretary		
Ť:	yped or Printed Name	•	

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