F/10000007/2

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



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13 JUL 15 PM 2: 20

SECRETARY OF STATE
(VISION OF CORPORATION

JUL 18 2013

T. BROWN



CSC - WIEMINGTON ... Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: July 11, 2013

Order#: 714494-004

Re: GEORGIA HAP ADMINISTRATORS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Vera M. Norris c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

	•	1302, 607.1508, or 617.1508, Florida Statute ganized under the laws of the State of <mark>Georg</mark> i	•
in orde	er to change its registered office or reg	istered agent, or both, in the State of Florida	l.
1. The name of	the corporation: GEORGIA HAP ADM	INISTRATORS, INC.	
2. The principal	office address: 1975 LAKESIDE PAR	KWAY, #310, TUCKER, GA 30084	
3. The mailing a	address (if different):		
4. Date of incor	orporation/qualification: 02/14/2011 Document number: F110000		
	d street address of the current registered rtment of State: (If resigned, enter resigned)	d agent and registered office on file with the gned)	
	NRAI SERVICES, INC.		
	1200 South Pine Island Road		= =
	Plantation, FL 33324		ISION ISION
6. The name and (if changed):	d street address of the new registered a	gent (if changed) and /or registered office	TSIGN OF CHAPTORATION 13 JUL 15 PM 2:20
	Corporation Service Company		REPORTA
	1201 Hays Street		. 20
	P.O. Box N	OT acceptable	,
	Tallahassee, FL 32301		
The street addreas changed will	ess of its registered office and the stree be identical.	et address of the business office of its regist	ered agent,
Such change wa authorized by th	as authorized by resolution duly adopt ne board, or the corporation has been i	ted by its board of directors or by an officer notified in writing of the change.	so
'		Dona Priebe, Vice President	
Signatu	rd of an officer or director	Printed or typed name and title	
I further agree to performance of agent. Or, if the hereby confirm	the appointment as registered agent of comply with the provisions of all stand of a limble of all stands and I am familiar with and is document is being filed merely to rethat the comporation has been notified nerely company	atutes relative to the proper and complete I accept the obligation of my position as reg effect a change in the registered office addr	ristered ess, I
By: Clarate	ca dan	07/05/2013	
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Elizabeth A Day	wson, Asst VP		
Ty	yped 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 * * *