Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

REGISTERED AGENT CHANGE HSA-USRH CORPORATION

Certificate of Status	0
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COVER LETTER

Amendment Section

TO:

Division of Corporations	
SUBJECT: HSA-USRH CORPORATION Name of Corporation	
DOCUMENT NUMBER: F23000003349	
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this r	matter to the following:
Jessica Wittry	
Name of Contact Person	
Registered Agent Solutions, Inc.	
Firm/Company	
5301 Southwest Pkwy Suite 400	
Address	
Austin, Texas 78735	
City/State and Zip Code	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, pl	ease call:
Jessica Wittry	at (888) 705-7274
Name of Contact Person	at (888) 705-7274 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the D	Department of State.
Mailing Address: Amendment Section	Street Address:
Amendment Section Division of Corporations	Amendment Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.050, unge is submitted for a corporation organi or to change its registered office or registe	ized under the laws of the State of Wise	consin	2.
1. The name of	the corporation: HSA-USRH CORPORAT	ION		
2. The principal	office address:ORD RD ORLANDO, FL 32812			
3. The mailing a	address (if different): 17863 170TH AVEN	UE.SUITE 101, SPRING LAKE, MI 49-	156	
4. Date of incor	poration/qualification: 05/26/2023	Document number: F2300000334	19	
5. The name and	d street address of the current registered ag	gent and registered office on file with the	he	
	THE REGISTERED AGENT COMPANY		202ւ	
	236 E 6TH AVENUE		, APR	71
	TALLAHASSEE, FL 32303		<u> </u>	FILE
THE REGISTERED AGENT COMPANY 236 E 6TH AVENUE TALLAHASSEE, FL 32303 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Registered Agent Solutions, Inc.				Ö
	Registered Agent Solutions, Inc.	· ·	. 0	
	2894 Remington Green Ln. Stc. A			
	P O. Box Tallahassee, FL 32308	NOT acceptable		
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its re	gisteree	d agent,
	as authorized by resolution duly adopted he board, or the corporation has been not			
Isl Juckyn V	Vright tre of an officer or director	Jaclyn Wright, Authorized Person		
I hereby accept I further agree of my duties, ar document is be	the of an other or director The appointment as registered agent and to comply with the provisions of all statud I am familiar with and accept the obli- ing filed merely to reflect a change in the s been notified in writing of this change.	ites relative to the proper and comple gation of my position as registered as	rent. O	r, if this
Mark	biodil	04/19/2024		
Significant Signif	and the Registered Agent	Date		
	chalf of an entity:			
	er Assistant Secretary			
ı	yped or Printed Name			

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