E9500000985

(Re	equestor's Name)	
(Ad	dress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
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JUN 3 0 2016 C. CARROTHERS

COVER LETTER

TO:

Amendment Section Division of Corporations

ATC HEALTHCARE SERVICES, INC.

Name of Corporation

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Harbor Compliance

Name of Contact Person

Harbor Compliance

Firm/Company

48-50 W Chestnut St Ste 301

Lancaster, PA 17603

City/State and Zip Code

mgoldberg@atchealthcare.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harbor Compliance

Name of Contact Person

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

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

	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Georgia	
in order to change its registered office o	or registered agent, or both, in the State of Florida.	
1. The name of the corporation: ATC HEALT	HCARE SERVICES, INC.	
2. The principal office address: 1983 MARC	US AVE E 122, LAKE SUCCESS, NY 11042	
3. The mailing address (if different): 1983 MA	ARCUS AVE E 122, LAKE SUCCESS, NY 11042	
4. Date of incorporation/qualification: 03/01/1	995 Document number: F9500000985	
	istered agent and registered office on file with the	
CORPORATION SERV	/ICE COMPANY	
1201 HAYS STREET	7 (a)	
TALLAHASSEE, FL 32	TALLAHASSEE, FL 32301-2525	
6. The name and street address of the new registe (if changed):		
REGISTERE	D AGENTS INC.	
3030 N. Rocky Poin	it Drive, STE 150A 플루 급	
	Box NOT acceptable	
Tampa, FL 33607		
The street address of its registered office and the as changed will be identical.	ne street address of the business office of its registered agent,	
Such change was authorized by resolution duly authorized by the board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.	
Sul S	DAVID SAVITSKY, CEO	
Signature of an phicer of director I hereby accept the appointment as registered a I further agree to comply with the provisions of performance of my duties, and I am familiar wi agent. Or, if this document is being filed merel hereby confirm that the corporation has been n	all statutes relative to the proper and complete th and accept the obligation of my position as registered by to reflect a change in the registered office address, l	
Signature of Registered Aucti	06/23/2016	
If signing on behalf of an entity:	-	
Bill Havre/Assistant Secretary		
Typed or Printed Name	_	
* * * FIL	ING FEE: \$35.00 * * *	

MAKE: CHECKS: PAYABLE TO: FLORIDA-DEPARTMENT OF: STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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CR2E045 (03/12)