## Document Mamber Provided Control of the Control of

CF Corporation Sy	rstem			
Requestor's Name 660 East <b>J</b> efferso	on Street	800002617768 5		
Address Tallahassee, FL 3	22310 222-1092			
City State Zip		-08/17/9801101007		
·			****420.00 ****	*35.00
CORPO	RATION(S) NAME			
			= <del>2</del> A <b>8</b> -	
			AECH <b>8</b>	
_			ET S T	
Personacare 11	$\sim$		SER TH	
VPI JUNE / 11		······································	THE B G	
			OR A	
() Profit			製品。	
() NonProfit	() Amendmo	ent	() Merger	
() Foreign	( ) Dissolutio	on/Withdrawal	() Limited Liability	z Compańy
( ) Foreign	( ) Dissolution	n n vviti i Gi avvai	() hambeed badearre	7 00
() Limited Partnership	() Annual R	•	() Other	
() Reinstatement	()Name Regi	stration	Change of R.A.	
()Fictitious Name () Certified Copy	() Photo Co		() CUS	
() Corunou Copy	(). Hoto oo	,p.100	(/ 000	
() Call When Ready	(XX) Call if Pro	blem	() After 4:30	
(x) Walk In ( ) Mail Out	() Will Wait		Pick Up	
( ) Iviali Out		·		
Name Availability	Discos Datas Thebase	Coning	01.0	
	Please Return Extra File Stamped.	Copies	X117	
Document Examiner	Than	k You!!		
Updater \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			•	
Verifier V				
\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Inne	·		
Acknowledgment (	7100			
W.P. Verifier	1			

CR2E031 (1-89)

2

## Florida Department of State, Jim Smith, Secretary of State

## 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, the undersigned corporation organized under the laws of the State of <a href="mailto:submits">DELAWARE</a> submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1a. The name of the corporation is: PERSONACARE, INC.
1b. Date of incorporation May 20, 1996 Document number F96000002521
2. The name and address of the current registered agent and office:
THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, TALLAHASSEE, FL 32301-2525
3. The name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  C T CORPORATION SYSTEM
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida 3332
The street address of its registered agent 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 resolution daily adopted by its board of directors of by
JOSEPH LANDENWICH, ASST. SEC'Y  AUGUST 4, 1948  DATE  JOSEPH LANDENWICH, ASST. SEC'Y  (Type or printed name and title)
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.  SIGNATURE BY: CAPACITY SERVICE OF
CAROL RECORD, ASST. SEC'Y (Registered Agent)
DATE <u>8-13-99</u> Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Filing Fee: \$35.00

(FLA. - 2194 - 3/4/92)

CR2E045 (7-91)