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		FLORITE STATE
C T Corporation System Requestor's Name 660 East Jefferson Street	·	7
Address Tallahassee, FL 32301 City State Zip Corporatio	Phone N(S) NAME	400002853234! -04/27/9901051011 *****875.00 ******35.00
11 (2)	Services of Plantate	
() Profit () NonProfit	() Amendment	() Merger
() Limited Liability Compan () Foreign	() Dissolution/Withdraw	al () Mark
() Limited Partnership	() Annual Report () Reservation	() Other Change of R.A. () Fictitious Name
() Limited Liability Partner () Certified Copy	() Photo Copies	() CUS
() Call When Ready () Walk In () Mail Out	() Call if Problem () Will Wait	() After 4:30 XX Pick Up
Name Availability Document Examiner	4/27/99 PLE	TASE RETURN EXTRA COPY(S) FILE STAMPED THANKS JOEY
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Acknowledgment		
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CR2E031 (1-89)

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 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: ManorCare Health Services of Plantation,
Inc.
1b. Date of incorporation September 23, 1997 Document number F97900 001971
2. The name and address of the current registered agent and office:
Corporation Service Company
1201 Hays Street, Tallahassee, FL 32301
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 the board. R. Jeffrey Bixler, Vice Pres. & Secy. (Type or printed name and title)
3/16/99
/ DATE
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.
Gil S. Apelis, Asst. Secretary (Registered Agent) DATE
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Filing Fee: \$35.00

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

CR2E045 (7-91)

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