

ACCOUNT NO.

072100000032

REFERENCE

:- 526407 4381472

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: December 22, 1999

ORDER TIME :

2:13 PM

ORDER NO. : 526407

CUSTOMER NO: 4381472

800003078588--7

CUSTOMER:

Janice Myers, Legal Assistant

Broad And Cassel

Suite 1100

390 North Orange Avenue Orlando, FL 32801

CHANGE OF AGENT

NAME: NUROCK HYDE MANOR, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

__ PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson

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 617.15 Florida Statutes, the undersigned corporation organized under the laws of the S Georgia submits the following statement in order to change its registere or registered agent, or both, in the State of Florida	iös, tate of
or registered agent, or both, in the State of Florida.	d office
Ta. The name of the corporation is: NUROCK HYDE MANOR, INC.	ALL ALL
	SE
1b. Date of incorporation 12/13/99 Document number	
 The name and address of the current registered agent and office: BSC Corporate Services of Central Florida, Inc. 	ORDA
390 North Orange Avenue, Suito 1100, Orlando, FL 32801	
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Corporation Service Company	***
1201 Hous Street Till	
1201 Hays Street Tallahassee, FL 32301	
of its registered agent as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors of authorized by the board.	or by
SIGNATURE Robert G. Hoskins	
- 1yped or printed name and title	
DATE	
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATE 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 CONTINUE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.	ED Y M-
DATE 12-22-99 County (Registered Agent)	2
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	
· FILING FEE: \$35.00)

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CAROLYN A ROWLAND

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Date: 12/10/99 Time: 4:08:20 PM