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De Maria

COVER LETTER

TO: Amendme Division of	ent Section of Corporations	
SUBJECT: MS	Home Care Corporation (Name of Corp	oration)
DOCUMENT NI	MBER: J29527	
The enclosed State	ement of Change of Registered Office/A	gent and fee are submitted for filing.
	orrespondence concerning this matter to	-
	Yvonne G. Grassie, Esq.	
	(Name of Contac	t Person)
	Jones, Walker, Waechter, Poiteve (Firm/Comp	ent, Carrere & Denegre, LLP any)
=	(Address)
<u>,</u>	Alami, Florida 33131 (City/State and Z	(ip Code)
For further informa	ation concerning this matter, please call:	•
Yvonne G. Grassi	-	t (305) 679-5724 (Area Code & Daytime Telephone Number)
•	me of Contact Person) O check made payable to the Departmen	
	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

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu ange is submitted for a corporation organized under the laws of the State of <u>Flor</u> er to change its registered office or registered agent, or both, in the State of Florid	ida		
1. The name of	the corporation: MS Home Care Corporation			
2. The principal Miami, Flori	office address: 1400 N.E. Miami Gardens Drive, Ste. 200 ida 33179		<u> </u>	
3. The mailing a	address (if different): same			
4. Date of incorp	poration/qualification: 08/20/1986 Document number: J29527			
	d street address of the current registered agent and registered office on file with the rtment of State:	e		
	Craig M. Dorne, P.A.			
	407 Lincoln Road, PH SE			
	Miami Beach, FL 33139	≯ ∽	0	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	ECRE TA	7 SEP -	-
	Yvonne G. Grassie, Esq.	RY G	υ >>>) :***T
	601 Brickell Key Drive, Suite 500	F ST	3	
	(P.O. Box NOT acceptable) Miami, Florida 33131	RIEA	5	-
	ess of its registered office and the street address of the business office of its registered.		igent,	-
Ha	as authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change. Har ley Sy ke (Printed or typed name and title)	cer so		
I hereby accept I further agree t of my duties, an document is bei corporetion has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complet at am familiar with and accept the obligation of my position as registered aging filed merely to reflect a change in the registered office address, I hereby cost been notified in writing of this change.	e perfori ent. Or, infirm the	nance if this at the	
1	2 8/22/07			
$\langle M I \rangle^{-1}$	half of an entity: (Date)			
Yvohne G. Gr				
\bigcup	Typed or Printed Name)			

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