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S. YOUNG



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Logan Hall logan.hall@cscglobal.com

Date: October 31, 2018

Order#: 458906/007

Re: COMPREHENSIVE HOME CARE OF SOUTHWEST FLORIDA, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Logan Hall c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STORT LANGE FLORIDA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Name of the limited liability company: COMPREHENS	SIVE HOM	ME CARE OF SOUTHWEST FLORIDA, LLC
2. (a	33920 US HIGHWAY 19 N STE. 341	(b)	33920 US HIGHWAY 19 N STE. 341
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	PALM HARBOR, FL 34684	<u> </u>	PALM HARBOR, FL 34684
	05/04/2004		L04000033912
3.	Date of filing/registration in Florida	4.	Document number
5. (a) MOSKOWITZ, MICHAEL W, ESQ. MOSKOWITZ, MANDELL, SAL	.IM & SIMOV	WITZ, PA
(b)	Registered Agent and Registered Office shown on the records of t	the Florida I	Dept. of State:
	800 CORPORATE DR - STE 500		
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)	—————————————————————————————————————
	FT LAUDERDALE .FL	33334	FILE AllASSEE
	Corporation Service Company		
	Enter name of NEW Registered Agent and/or NEW Registered	Office addr	ress: CRIT CO
	1201 Hays Street		 07
	NEW Registered Office Address:		
	Tallahassee . FL	32301	
the ch agent was/v	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liager authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the registed bility confident from the first the first the firmit from the first the f	ered office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in
	Xee & Course	Jill Cil	ilmi, Authorized Person
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to me	ely accept the appointment as registered agent and agricions of all statutes relative to the proper and complete pligations of my position as registered agent as provided rely reflect a change in the registered office address. I have writing of this change	performar I for in Ch	nce of my duties, and I am familiar with and accep hapter 605, F.S. Or, if this document is being filed
Signat	ure of Registered Agent Corporation Service Company	BY: Gra	ace E. Kirby, Assistant Vice President