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DATE: 10/24/14

NAME: CARETENDERS VISITING SERVICES OF GAINESVILLE LLC

TYPE OF FILING: CHANGE OF AGENT

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

Pursuant to the provisions of sections 605.0114, 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.

•		
Name of the limited liability company:Carefender	ers Visiting Services of Ge	ainesville, LLC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 9510 ORMSBY STATION RO	AD, SUITE 300
	LOUISVILLE, KY 40223-5016	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	9510 ORMSBY STATION ROAD, SUITE 300	
(IVVIET MANY BULLOUX OFFICE BUX)	LOUISVILLE, KY 40223-5016	
02/18/2005	L05000016996	ST. E
3. Date of filing/registration in Florida	4. Document number	À. C.
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida I	T
Registered Agent:	CT Corporation System	m ma 7
Registered Office Address:	1200 South Pine Island Road	FLOT F
	Plantation, FL 33324	
NEW Registered Agent: NEW Registered Office Address:	National Corporate Research, Ltd., Inc. 155 Office Plaza Drive	
<u>NEW</u> Registered Agent:	National Corporate Research, Ltd., Inc.	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		
	Tallahassee	,FL_32301
f the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide iability company, it is hereby confirmed that the change the members of the limited liability company or as otherwhere of the limited liability company. Ignature of a member or authorized representative of a member	Florida street address of the ntical. Or, in the case of a F (s) was/were authorized by an wise provided in the articles of the stricks.	registered office lorida limited n affirmative vote o
Patrick Todd Lyles, Senior Vice President		
Printed or typed name of signee		
I hereby accept the appointment as registered agent and omply with the provisions of all statutes relative to the point of all statutes relative to the point of a familiar with and accept the obligations of my hapter 605, F.S. Or, if this document is being filed to a daress, I hereby confirm that the limited liability company.	agree to act in this capacity proper and complete perform position as registered agent nerely reflect a change in the my has been notified in writi). I further agree to nance of my duties, as provided for in e registered office ng of this change.
signature of Registered Agent Sean Honan, Assistant Secre	tary	
Division of Corporations, P.O. Box		14
FILING FEE:	\$25.00	

INHS18 (12/13)