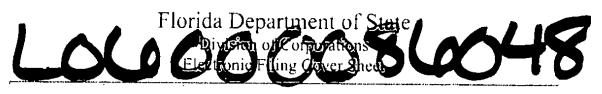
To:



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Division of Corporations

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LLC REGISTERED AGENT CHANGE LIFELINE HOME HEALTH CARE OF LAKELAND, LLC.

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To:

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.

I. Na	nme of the limited liability company: LIFELINE HOM	IE HEALTH CARE	OF LAKELAND, LLC
2. (a)	No change	(b) No chan	nge
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
s.	08/31/2006 Date of filing/registration in Florida COGENCY GLOBAL INC	L0600008	Document number
i. (a)	Registered Agent and Registered Office shown on the records of	the Florida Days of Co	
(b)	115 NORTH CALHOUN ST	the Honda Dept. of 50	ate:
	Registered Office Address (MUST BE FLORIDA STREET) SUITE 4	ADDRESS)	
	TALLAHASSEE	32301	
	C T Corporation System	·	2023 NOV 16
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	– 70 V
	1200 South Pine Island Road		16
	NEW Registered Office Address:		- AH 9: 5
	Plantation FL	33324	ੱ ਹ
ne cha gent w ras/we ne artic	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lie re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the forosec, Secretary	the registered officibility company, it of the limited liability	ce and the business office of the registere is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
	ure of a member or authorized representative of a member	/s/ Kara Korose	Printed or typed name of signee
hereh rovisi ne obli o mere otifica y:	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address. If it writing of this change. C T Corporation System [5] Michele Holden, Asst Sect. e of Registered Agent	ee to act in this cap performance of my d for in Chapter 60 vereby confirm that	navity. I further ourge to comply with the

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