L06000110767

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CARETENDERS OF JACKSONVILLE, LLC

TYPE OF FILING: CHANGE OF AGENT

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AUTHORIZATION: ABBIE/PAUL HODGE

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:Caretenders	s of Jacksonville, LLC	
2. (a) Principal office address of limited liability company: 9510 ORMSBY STATION ROAD, SUITE 300 (Note: MUST BE STREET ADDRESS)		
(1000) 11001 12 (11021 120100)	LOUISVILLE, KY 40223-5016	
(b) Mailing address of limited liability company: (Note: MAX BE POST OFFICE BOX)	9510 ORMSBY STATION ROAD, SUITE 300	
(11274 10100 101 1 2 2 1 2 1 2 1 2 1 2 1 2 1 2	LOUISVILLE, KY 40223-5016	
11/15/2006	L06000110767	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
Registered Agent:	CT Corporation System	
Registered Office Address:	1200 South Pine Island Road	
	Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> NEW Registered Agent:		
NEW Registered Agent:	National Corporate Research, Ltd., Inc.	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Drive	
	Tallahassea ,FL 32301	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Patrick Todd Lyles, Senior Vice President		
Printed or typed name of signee	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the product of am familiar with and accept the obligations of my post Chapter 60%, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	<i>></i> √ 8	
Signature of Registered Agent Sean Honan, Assistant Secretary		
Division of Corporations, P.O. Box 633	27. Tallahassee, FL 32314	

FILING FEE: \$25.00

INHS18 (12/13)