## k07000117645

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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02/10/21--01015--010 \*\*25.00

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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: February 5, 2021

Order#: 639480/198

Re: INFINITY HOME CARE OF BROWARD, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$\$25.00.

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:Meghan Groom 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

## 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. Na	ame of the limited liability company:INFINITY HOM	E CARE	OF	BROWARD, LLC	
2. (a)	3854 American Way Suite A		b)_	3854 American Way Suit	te A
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	, =	Mailing address of	limited liability company:  EPOST OFFICE BOX)
	Baton Rouge, LA 70816-4013		- E	Baton Rouge, LA 70816-	4013
	11/26/2007		LC	07000117645	
3.	Date of filing/registration in Florida	4.		Document num	iber
5. (a)	CT CORPORATION SYSTEM				
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	1200 SOUTH PINE ISLAND ROAD SUITE 116				
	PLANTATION,	33324			
					13
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				221
	Tares have of 141,50 registered Agent and of 141,50 registered	u (mice ac	aar	<u></u> .	2021 F.E.
	Corporation Service Company				
	NEW Registered Office Address:			<del></del>	
	1201 Hays Street				H
				<del></del>	ç. G
	Tallahassee	32301			( <u>.)</u>
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	register ability co of the lin limited	ed omp nite liab	office and the business o pany, it is hereby confirm ed liability company or as	ffice of the registered ned that the change(s)
Signa	ture of a member or authorized representative of a member			Printed or typed n	name of signee
provisi the obl to mere	by accept the appointment as registered agent and aginous of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I din pritting of this change.	ree to ac. perform d for in ( hereby c	t in tanc Cha conf.	this capacity. I further a se of my duties, and I am upter 605, F.S. Or, if this irm that the limited liabi	agree to comply with the familiar with and accept s document is being filed lity company has been
Signatu	ire of Registered Agent	G	irac	e E. Kirby, Asst. Vice Pr	resident