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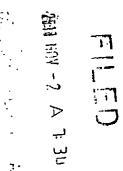
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PICK-UP WAIT MAIL								
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Special Instructions to Filing Officer:								
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Logan Hall logan.hall@cscglobal.com

Date: October 31, 2018

Order#: 458906/011

Re: DISTINCTIVE HOME CARE OF PALM BEACH, 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

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	me of the limited liability company: DISTINCTIVE HO	OME CA	RE OF PAL	M BEACH, LLC			
2.	(a)	6450 NW 5TH WAY	(b)	6450 NV	W 5TH WAY			
		Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)	-	N	failing address of limit (Note: MAY BE POS			
		Suite B	_	Suite B		7.5		
		FT. LAUDERDALE, FL 33309	_	FT. LAUD	ERDALE, FL 3330)9	 -	
		07/29/2008	_	L0800007	-	12		
3.		Date of filing/registration in Florida	4.	1	Document number	101		
5.	(a)	MOSKOWITZ, MICHAEL W, ESQ. MOSKOWITZ, MANDELL, SALIM	4 & SIMOV	VITZ, PA	•	7	1	
		Registered Agent and Registered Office shown on the records of the	e Florida I	Dept. of State:		<i>``</i>	Tr,	
		800 CORPORATE DR - STE 500				D	、	
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)			بب		
					7.	r W		
		FT LAUDERDALE .FL.	33334		·			
			-					
	(b)	Corporation Service Company						
		Enter name of NEW Registered Agent and/or NEW Registered O	ffice addi	ress;				
		1201 Hays Street						
		NEW Registered Office Address:						
								
		Tallahaaaa						
		Tallahassee , FL_	32301					
the ago wa	char ent w s/we	mited liability company is not organized under the laws age or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of the of organization or the operating agreement of the limited liab.	ne registo ility con the limit	ered office a apany, it is ed liability	and the business o hereby confirmed company or as oth	ffice of th that the cl	ne registered hange(s)	
<u> </u>					uthorized Person			
		presi a member or authorized representative of a member			Printed or typed name	_		
pro the to i noi	obli obli nere ified	exactept the appointment as registered agent and agree ons of all statutes relative to the proper and complete parties of my position as registered agent as provided the reflect a change in the registered office address. The in writing of this change	erformar for in Ch reby con	ice of my di napter 605, ifirm that th	uties, and I am fam F.S. Or, if this do ne limited liability (niliar with cument is company	i and accept being filed has been	
Sig	natur	of Registered Agent Corporation Service Company	BY: Gra	ice E. Kirb	y, Assistant Vicc	Preside	nt	