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18 NOV -2 AN 8: IS SECTATION OF STATE TALLAHASSEE, FLORIDA

NOV 1 9 2018 S. YOUNG



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#: 458906/001

Re: C PLUS 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

FILED 18 NOV -2 AM

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: C PLUS OF PA	LM BEA	H, LLC				
2. (a)	6450 NW 5TH WAY	(h	6450 1	NW 5TH WAY			
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(°		Mailing address of limite (Note: MAY BE POS	*	•	•
	Suite A		Suite A				
	FT. LAUDERDALE, FL 33309	_	FT. LAL	JDERDALE, FL 3330	9	_	<u></u> .
	07/29/2008		L080000	72671			
3.	Date of filing/registration in Florida	- - 4.		Document number			
5. (a)	MOSKOWITZ, MICHAEL W, ESQ. MOSKOWITZ, MANDELL, SALI	IM & SIMO	VITZ, PA				
). (u)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of Sta				
	800 CORPORATE DR - STE 800						
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)		- -			
						$\overline{\infty}$	
	FT LAUDERDALE . FL	33334		_		A CN	T
						-2	
(b)	Corporation Service Company			_	21 25 21 25	<u>~</u>	Ö
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	ress:		유.	င်ာ	
	1201 Hays Street				\$7.1 \$7.1	<u>~</u>	
	NEW Registered Office Address:			_			
	Tallahassee FI	32301					
	, FL	_52501		_			
	imited liability company is not organized under the law inge or changes are made, the Florida street address of						
agent v	vill be identical. Or, in the case of a Florida limited lia	bility co:	npany, it i	is hereby confirmed t	that the cl	hange	(s)
	ere authorized by an affirmative vote of the members o				erwise pr	ovide	d in
.,,,,	Xi & CO		•	orized Person			
Signal	ture of a member or authorized representative of a member	<u> </u>	iirii, Addic	Printed or typed name of	of signee		
provisi the obl to mere notifica	w accept the appointment as registered agent and agrous of all statutes relative to the proper and complete in ignitions of my position as registered agent as provided by reflect a change in the registered office address. I have a change in the registered office address. I have a change in the registered office address.	performa	nce of my	duties, and I am fam	uliar with	h and e	accent
Signatu	re of Registered Agent Corporation Service Company	BY: Gr	ace E. Ki	rby, Assistant Vice	Preside	nt	