L08000108272

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





100280203691

12/30/15--01023+-00023 **25.00
**25.00
**25.00
**25.00
**25.00
**25.00
**25.00
**25.00

DEC 3 1 2015 J. HARRIS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard

lindsey.lockard@cscglobal.com

Date: December 24, 2015

Order#: 922383/046

Re: OP THERAPY-FL, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.0.

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:Lindsey Lockard

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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.

2. (a)	3820 Mansell Road	(b)	3820 Mansell Road	
` '	Principal office address of limited liability company:			of limited liability company:
	(Note: MUST BE STREET ADDRESS)		(Note: MAY)	BE POST OFFICE BOX)
	Suite 280		Suite 280	
	Alpharetta, GA 30022	 .	Alpharetta, GA 30022	
	11/19/2008		L08000108272	
3.	Date of filing/registration in Florida	 4.	Document no	mher
٠,	bate of imaging station in 1 longs	т.	Document in	imoci
5. (a)	C T Corporation System			
	Registered Agent and Registered Office shown on the records of	of the Florida I	Dept. of State:	
	1200 South Pine Island Road			
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)		
				8° 31 (2000)
	Plantation	L 33324		The second
		DOOOL1		63 Co. 1
(b)	Corporation Service Company			
(0)	Enter name of NEW Registered Agent and/or NEW Registere	ed Office add	ess:	
			 -	<u> </u>
	1201 Hays Street			And a superior of the superior
	NEW Registered Office Address:		 _	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	registered Office Address.			
	7.11.)			
	Tallahassee , F	L 32301		
the cha agent was/w	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registe liability con of the limit e limited lia	ered office and the busing any, it is hereby conficed liability company or bility company.	ness office of the registered rmed that the change(s) as otherwise provided in
Signa	into of a member or authorized representative of a member	Dona	Priebe, Authorized Pers	name of signee
=	·		•	•
provis	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, I	e pertormar	ice of my duties, and I a	m familiar with and accent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

By: Elizabeth A. Dawson, Asst. Vice President

INHS18 (2/14)