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2015 DEC 30 Ph 4: 16

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#: 922383/126

Re: TANDEM HEALTH CARE OF WEST PALM BEACH, 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: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.

. (a)	3820 Mansell Road	(b)	3820 Mansell Road	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	y:
	Suite 280	Suite 280		
	Alpharetta, GA 30022	<u>A</u>	Alpharetta, GA 30022	
	11/19/2008	LC	08000108301	
i.	Date of filing/registration in Florida	4.	Document number	
, , ,	C.T. Corneration System			
i. (a)	C T Corporation System Registered Agent and Registered Office shown on the records o	of the Florida Den	nt of State	
	,	t die 1 torida Dep	pt. 01 blate.	
	1200 South Pine Island Road			
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS)		
(b)			三	
	Plantation , F	L 33324		1
				4.****
	Corporation Service Company			ps Na C
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		<u>ss:</u>	
				•
	1201 Hays Street		등을 투	
	NEW Registered Office Address:			
			and the transfer of the second	
	Tallahassee, F	L_32301		
f the l	imited liability company is not organized under the la	aws of the Sta	ate of Florida, it is hereby confirmed that af	ter
	inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited l			
vas/w	ere authorized by an affirmative vote of the members	of the limited	d liability company or as otherwise provide	d in
	cles of organization or the operating agreement of th	e limited liabi	ility company.	
he arti		Dona P	Priebe, Authorized Person	
he arti	1 1 2 6			
he arti	turn of a member or authorized representative of a member		Printed or typed name of signee	

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

INHS18 (2/14)

By: Elizabeth A. Dawson, Asst. Vice President