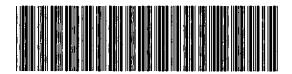
L08000108305

(Re	equestor's Name)							
(I/C	equestor's Name;							
(4.1	Manager S							
(Address)								
	•							
(Address)								
(Cit	ty/State/Zip/Phone #	f)						
_	_	_						
PICK-UP	WAIT	MAIL						
(Bu	siness Entity Name)						
(Document Number)								
· ·	,							
Cartified Conies	Certificates o	f Statue						
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								

Office Use Only



100280201381

12/30/15-01021-018 **25.00

SECRETARY OF STATE

چ ه.

DEC 3 1 2015

3 MASON



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#: 922383/116

Re: TANDEM HEALTH CARE OF ORANGE PARK, 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.

1.	Na	me of the limited liability company: TANDEM HEALT	TH CAR	OF ORA	NGE PARK, LLC			
2	(a)	3820 Mansell Road	(b) 3820 Mansell Road					
<i>L</i> .	(a) .	Principal office address of limited liability company:	Mailing address of limited liability company:			v:		
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE PO			
		Suite 280	_	Suite 28	0			<u></u>
		Alpharetta, GA 30022	_	Alpharet	tta, GA 30022			
		11/19/2008	L08000108305					
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	C T Corporation System						
	` '	Registered Agent and Registered Office shown on the records of th	e Florida l	Dept. of Stat				
		1200 South Pine Island Road						
		Registered Office Address (MUST BE FLORIDA STREET A)	DDRECC)		 -			
		INCOLUENCIA CINCO MARCON INCOLUENCIA DE L'EXPERTANTE DE L'EXPE	DDICE33)					
					 .			
		Plantation , FL	33334			2		
		,1L	55524			2815	MECHANIC PROPERTY.	
	/L)	Corporation Service Company			12 (* *) 12 (* *) 12 (*)	33		
	(b) .	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	-ess:	- SX	w	Paris and	;
		The state of the s	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u></u> .	HH C	0		
		1201 Have Street			E O	U		
		1201 Hays Street NEW Registered Office Address:			STATE LORID	ふ	\mathbf{O}	
		NEW Registered Office Address:			E E	න ව		
					- -	w		
					•			~
		Tallahassee	32301					
		, PL	J2301		_			
If t	he lii	nited liability company is not organized under the laws	of the S	tate of Fl	orida, it is hereby co	onfirm	ed that aft	er
the	chai	nge or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited liab	he regist	ered offic	e and the business of	ffice o	of the regis	stered
		re authorized by an affirmative vote of the members of						
		les of organization or the operating agreement of the li					- F	
		()26 2	Dona	Priebe, A	uthorized Person			
S	ignati	of a member or authorized representative of a member			Printed or typed name	of signe	ee	
pro the to r not	visic obli nere ified	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change. Corporation Service Company	e to act i erformai for in Ch creby cor	n this cap nce of my napter 603 firm that	acity. I further agreduties, and I am fan S. F.S. Or, if this do the limited liability	ze to ci iliar v cumen compo	omply with with and a it is being any has be	h the eccept filed en
		of Registered Agent zabeth A. Dawson, Asst. Vice President						
_ y	. 1.,,,	Division of Corporations • P.O. Bo	x 6327•	Tallahas	ssee, FL 32314			

FILING FEE: \$25.00

INHS18 (2/14)

1. 11. 5%