L08000108310

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(Address)				
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(Cit	y/State/Zip/Phon	e #)		
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(Document Number)				
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SECRETARY OF STATE

DEC 3 1 2015

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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#: 922383/102

Re: TANDEM HEALTH CARE OF LAKELAND, 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. N	ame of the limited liability company: TANDEM HEAL	TH CAR	OF LAKELAND, LLC	
2. (a)	3820 Mansell Road	(b)	3820 Mansell Road	
2. (4)	Principal office address of limited liability company:	Mailing address of limited liability company:		
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST O	FFICE BOX)
	Suite 280		Suite 280	
	Alpharetta, GA 30022	_	Alpharetta, GA 30022	
	11/19/2008		L08000108310	
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 the	he Florida I	Dept. of State:	
	1200 South Pine Island Road			
			2015 (2015)	4.aksymep

	Plantation , FL_	33324		£
(b)	Corporation Service Company		OF STATE	П
(.,	Enter name of NEW Registered Agent and/or NEW Registered (Office add		D
			DA 5.5	
	1201 Hays Street			
	NEW Registered Office Address:			
	Tallahassee , FL	32301		
the cha agent v was/we the arti	imited liability company is not organized under the law- unge or changes are made, the Florida street address of to vill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the liab ere of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he d in writing of this change. Corporation Service Company	he regist bility con the limit imited lia Dona	ered office and the business office apany, it is hereby confirmed that ed liability company or as otherwishlity company. Priebe, Authorized Person Printed or typed name of sign this canacing. I further caree to	of the registered the change(s) ise provided in
	Corporation Service Company			

FILING FEE: \$