L08000108791

(Requestor's Name)	_	
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SECRETARY OF SIME.

FEB 2 6 2013

T. HAMPTON



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 llockar2@cscinfo.com

Date: February 21, 2014

Order#: 010222/054

Re: CITRUS HMA, 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, 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. Name of the limited liability company: CITRUS HMA, LL	.C	
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	y: 6201 N. SUNCOAST BOULEVARD	
(Note: MOST BE STREET ADDRESS)	CRYSTAL RIVER FL 34428	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	5811 PELICAN BAY BOULEVARD SUITE 500 NAPLES, FL 34108	
11/24/2008	L08000108791	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State: CT CORPORATION SYSTEM	
Registered Agent:		
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD	
	PLANTATION FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>	V Registered Office address: CORPORATION SERVICE COMPANY	
NEW Registered Agent:		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	TALLAHASSEE ,FL 32301	
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Dona Priebe, Authorized Person Printed or typed name of signee I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proceeding of the obligations of my possured that the provisions of the obligations of my possured that the confirm that the limited liability company	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of the provided in the articles of organization or the provided in the articles of organization or the provided in this capacity. I further agree to open and complete performance of the duties, without as registered agent as provided for in the registered office.	
By: Signature of Registered Agent Corporation Service Company	Grace E. Kirby, Asst. Vice President	