Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6380

: CSH SERVICES, LLC Account Name

Account Number : I2007000016C

: (800)494-3124 Phone

Fax Number

: (561)455-9885

REGISTERED AGENT CHANGE

IPS OF FT. MYERS, LLC

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JUN - 1 2009

EXAMINER

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-09000/3/804 STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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.

l. Na	me of the limited liability company: IPS OF F1	. MYERS, LLC	, 11
2. (a)	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	8255 COLLEGE PKWY, SUITE 100	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	ET. MYERS FL 33919-5119 201 MONTGOMERY AVE SARASOTA FL 34243	. D
11/26/		L08000109874	_
3. Da	ite of filing/registration in Florida	4. Document number	
5. (a)) Registered Agent and Registered Office shown or	the records of the Florida Dept. of Sets	
	Registered Agent:		
	Registered Office Address:		29
	•	201 MONTGOMERY AVE	
•		SARASUTA PL 34243 US	3
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	EW Registered Office address:	œ °
	NEW Registered Agent:	A1A REGISTERED AGENT INC.	. 10
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5647 110TH AVENUE NORTH ROYAL PALM BEACH M.FL 33411	. C
that at office hereby liabili	limited liability company is not organized under the fier the change or changes are made, the Florida street of the registered agent will be identical. Or, in the confirmed that the change(s) was/were authorized ity company or as otherwise provided in the articles additionally company.	eet address of the registered office and the busin case of a Florida limited liability company, it is by an affirmative vote of the members of the li	ness F mited
(Signati	ure of a member or authorized representative of a member)		
Bradle (Printe	ey Wachowiak d or typed name of signes)		
2	eby accept the appointment as registered agent and by with the provisions of all statutes relative to the pmiliar with and accept the obligations of my position, if this accument is being filed to merely reflect and that the limited liability company has been notificant of Registered Agent)	agree to act in this capacity. I further agree to roper and complete performance of my duties, and a registered agent as provided for in Chapte a change in the registered office address, I here to the writing of this change.	and 1 7 608, by

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