LOROCOIILUAS

	(Requestor's Name)			
	(Address)			
	(vuoless)			
 .	(Address)			
	(City/State/Zip/Phone #)			
PICK-U	P WAIT MAIL'			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
·····				

Special Instructions to Filing Officer:

L. SELLERS

APR 20 2011

EXAMINER

Office Use Only



700201995617

04/18/11--01022--004 **25.00

11 APR 18 PH 3: 38
SECRETARY OF STATE

COVER LETTER

TO:	Registration Section Division of Corporations	i.	
SUBJ	ECT:		Health Systems, LLC
_			
Dear	Sir or Madam:		
The e	nclosed Registered Agent/	Registered Office (Change and fee(s) are submitted for filing.
Please	e return all correspondence	concerning this m	atter to the following:
	Stephanie F		
	Name of Per	son	
	Senior Care G		
	1240 Marbella Address	Plaza Drive	
	Tampa, FL City/State and Zi		
E	spapoulis@senioro	caregroup.com e annual report notification	on)
For fi	orther information concern	ing this matter, plea	ase call:
	Stephanie Papouli	s at (813) 341-2719 Area Code & Daytime Telephone Number
	STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for	the following amo	ount:
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy

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.

1. Name of the limited liability company:Senio	or Focus Health Systems, LLC
2. (a) Principal office address of limited liability compan	4040 M. I. II. Di D
(Note: MUST BE STREET ADDRESS)	Suite 120, Tampa, FL 33619
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1240 Marbella Plaza Drive Suite 120, Tampa, Florida 33619
December 23, 2008	L08000116663
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Karen Goldsmith
Registered Office Address:	P.O. Box 2011
	Winter Park, FL 32790
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW Registered Agent</u> :	W Registered Office address: David Vaughan
NEW Registered Office Address:	1240 Marbella Plaza Drive
(MUST BE FLORIDA STREET ADDRESS)	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change (so the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member. Stephanie Papoulis, CLO for Managing Member, SC Printed or typed name of signee. I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the province of the obligations of my per chapter 608, F.S. On if this document is being filed to me address, I hereby confirm that the limited liability company. Signature of Registered Agent	laws of the State of Florida, it is hereby florida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by arrangement vote rwise provided in the articles of organization y. HARY OF STAIL 3.33

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