

L09000102174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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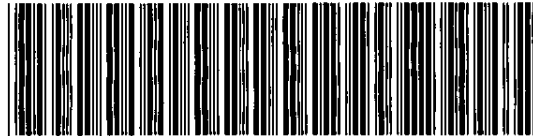
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SEP 13 2016
J. BRUCE

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 270988 7385899
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : August 29, 2016
ORDER TIME : 8:45 AM
ORDER NO. : 270988-005
CUSTOMER NO: 7385899

CHANGE OF AGENT

NAME: AT HOME INFUSION SERVICES LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 SEP 12 A 10:00

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AT HOME INFUSION SERVICES LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jenny Tran, Esq.

Name of Person

Brown & Streza, LLP

Firm/Company

40 Pacifica, Suite 1500

Address

Irvine, CA 92618

City/State and Zip Code

jenny.tran@brownandstreza.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jenny Tran, Esq.

at (949)

453-2900

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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TALLAHASSEE, FLORIDA

2010 SEP 12 A 10:00

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**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. Name of the limited liability company: AT HOME INFUSION SERVICES LLC

2. (a) 3500 NW BOCA RATON BLVD (b) 17777 CENTER CT DR
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

SUITE 704

SUITE 550

BOCA RATON, FL 33431

CERRITOS, CA 90703

10/22/2009

L09000102174

3. Date of filing/registration in Florida

4. Document number

5. (a) KAREN KACZMAREK

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3725 NW 3RD AVE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

BOCA RATON, FL 33431

(b) Corporation Service Company

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1201 Hays Street

NEW Registered Office Address:

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Sohail Merchant, CFO

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

Corporation Service Company BY: SARAH THOMAS, ASSIST. SECRETARY

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00