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(Red	questor's Name)	•••
(Address)		
(Add	dress)	
(City	//State/Zip/Phon	e #)
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(Business Entity Name)		
(Document Number)		
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SECRETARY OF STATE



CSC - WILMINGTON Suite 400
2711 Centerville Road Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: July 10, 2013

Order#: 712001/008

Re: SCIENCE CARE OF FLORIDA, 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: Vera M. Norris

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 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: SCIENCE CARE	OF FLORIDA, LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: 3902 N.W. 126th Avenue Coral Springs, FL 33065
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
09/15/2011	L11000105866
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:
Registered Agent:	Corporate Access, Inc.
Registered Office Address:	236 East 6th Avenue, Tallahassee, FL 32301
(b) Enter name of NEW Registered Agent and/or NEW	V Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address:	1201 Hays Street
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee: ,FL 32301
onfirmed that after the change or changes are made, the lacenfirmed that after the change or changes are made, the Floring the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) he members of the limited liability company or as otherwise he operating agreement of the limited liability company. Signature of a member or authorized representative of a member Frinted or typed name of signee I hereby accept the appointment as registered agent and agrouply with the provisions of all statutes relative to the province of the obligations of my post chapter 608, F.S. Or, if this document is being filed to meround agreement of the limited liability company By:	ree to act in this capacity. I fulfilled for in the per and complete performance of my fitting to the per and complete performance of my fitting the per and complete performance of my fitting the per and complete performance of my fitting the performance of the per
Signature of Register Agent Corporation Service Company	Sylvia Queppet, Assistant Vice President
Division of Corporations, P.O. Box 632	7. Tallahassee, FL 32314

FILING FEE: \$25.00

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Registered Agent:	Corporate Access, Inc.
Registered Office Address:	236 East 6th Avenue, Tallahassee, FL 32301
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
Medi DD I Iombi Bing; MDDRESS	Tallahassee ,FL 32301
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 identiability company, it is hereby confirmed that the change(such emembers of the limited liability company or as otherwishe operating agreement of the limited liability company.	lical. Or, in the case of a Florida limited
Signature of a member or authorized representative of a member	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my particular to the property of t	ogree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in the registered office y has been notified in writing of this change.
By: C (, a su	
Signature of Registered Agent Corporation Service Company Division of Corporations, P.O. Box 63	Sylvia Queppet, Assistant Vice President

FILING FEE: \$25.00