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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC REGISTERED AGENT CHANGE
HEALTH FRANCHISE NETWORK, LLC**

Certificate of Status	0
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Page Count	02
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is: HEALTH FRANCHISE NETWORK, LLC

2. (a) Principal office address of the limited liability company: 511 SE 5TH AVENUE
APT. 816
FORT LAUDERDALE FL 33301

(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

6/26/2013

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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: NRAI SERVICES, INC.

Registered Office Address: 1200 South Pine Island Road

Plantation FL 33324

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

NEW Registered Agent: Corporate Creations Network Inc.

NEW Registered Office Address: 11380 Prosperity Farms Road #221E

(MUST BE FLORIDA STREET ADDRESS)
Palm Beach Gardens FL 33410

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 of a member or authorized representative of a member)

by Angela Martin as attorney-in-fact

(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 of Registered Agent)

Angela Martin, Special Secretary

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

INHS18(10/99)

Corporate Creations International Inc.

11380 Prosperity Farms Road #221E

Palm Beach Gardens FL 33410

(561) 694-8107

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