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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

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

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## LLC REGISTERED AGENT CHANGE REHABILITATION CENTER AT PARK PLACE, LLC

Certificate of Status	0
Centified Copy	
Page Count	02
Estimated Charge	\$55.00

## 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. Na	une of the limited liability company: REHABILITATI	ON CEN	TER AT PAR	K PLACE, LL	(~			
2. (a)	7439 MERCHANT CT	(b) 7439 MERCHANT CT.						
(	Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited fiability company:  **Onle: MAY BE POST OFFICE BOX**)					
	LAKEWOOD RANCH, FL 04240		LAKEWOO	OD RANCH, FL 04240				
	01-08/2014		L1400 <del>0</del> 004208					
3. 5. (a)	Date of filing/registration in Florida CORPORATE CREATIONS NETWORK INC.	4.		Document nu	mber			
J. (u)	Registered Agent and Registered Office shown on the records of 801 US HIGHWAY 1  Registered Office Address (MUST BE FLORIDA STREET)							
	NORTH PALM BEACH , FL							
(b)	C T Corporation System							
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	ldress			2023 ACD 11		
	NEW Registered Office Address:					  		
	1200 South Pine Island Road				•••		<u>-</u>	
	Plantation F1.	33324				PH 12		
signa  I here provist the obtention meri	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited linere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It do no writing of this change.  C T Corporation System	the reginability confithe limited  JOI	stered office ompany, it is nited liability liability come DAVIS, MA	and the busing hereby configures or apany.  NAGER  Pointed or types  active I further	ness office rmed that t as otherwi	of the a he chai se prov	egistered lgc(s) lded in	

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