114000136340

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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11/29/18 DS



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: November 13, 2018

Order#: 478852/005

Re: CENTRAL FLORIDA DETOX, 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:Ashley Seeman c/o Corporation Service Company 251 Little Falls Drive 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 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. No	nne of the limited liability company: CENTRAL FLOR	RIDA DE	rox, llc				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (h)		3RD AVENU Mailing address (Note: MAY)	of limited	liability	company:
	FT LAUDERDALE, FL 33394	_	FT LAUC	DERDALE, FL	. 33394		
	08/29/2014		L140001	36340			
3.	Date of filing/registration in Florida	4.		Document no	umber		
5. (a)	GREENSPOON MARDER, P.A.						
(b)	Registered Agent and Registered Office shown on the records of the	he Florida l	Jept. of State	- 2:			
	200 EAST BROWARD BLVD SUITE 1800						
	Registered Office Address (MUST BE FLORIDA STREET A.	<u>DDRESS)</u>		-	;	Pis Egy	
	FORT LAUDERDALE , FL	33301		-	; ;;		
	Corporation Service Company			_		∑ >	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office addi	<u>'ess</u> :		: - -	<i>ر</i> پ س	
	1201 Hays Street				<i>;</i> •	o _	
	NEW Registered Office Address:						
	Tallahassee, FL_	32301					
the cha agent v was/we	imited hability company is not organized under the law inge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the I	the regist bility cor `the limit	ered office apany, it is ed liability	and the busi s hereby conf y company or	ness offi irmed th	ice of tl at the c	he registered :hange(s)
/s	s/ Mitchell Eisenberg	Mitch	Mitchell Eisenberg, Manager				
Signa	ture of a member or authorized representative of a member			Printed or type	d name of	signec	
provisi the obl to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I he I in writing of this change.	re to act i performa I for in Cl ereby con	n this cape ice of my c iapter 605 ifirm that	acity. I furtheduties, and La L.F.S. Or, if the limited lia	er agree am famil his docu ability co	to com iar witi ment iz impany	ply with the h and accept s being filed t has been
<u> </u>	Ince Cokyole	DV C	12 17	1 4 . 57		1	
Signatu	re of Registered Agent Corporation Service Company	BY: Gr	ice E. Kir	by Asst. Vic	ce Presid	dent	

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