

L16000085623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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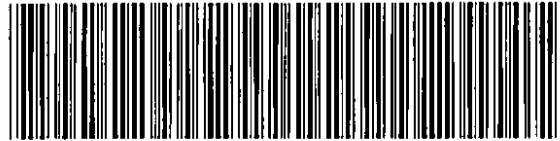
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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18 SEP 14 PM 4: 02

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18 SEP 14 AM 6: 00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
SEP 17 2018



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: September 14, 2018

Account#: 120000000088

Name: Marisa Kugelman

Reference #: C023563

Entity Name: KEMBERTON HEALTHCARE SERVICES, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$025.00

Signature: Marisa Kugelman

✪ CORPORATE HQ
COGENCY GLOBAL INC.
10 E 40 ST, 10 FL
NY, NY 10016
800.221.0102
+1.212.947.7200

✪ EUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTERED IN ENGLAND & WALES
REG. NO. 1040072
6 BEVIS MARKS, 11 FL
LONDON EC3A 7BA
+44 (0)20.3786.1090

✪ ASIA PACIFIC HQ
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A HONG KONG LIMITED COMPANY
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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, 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: KEMBERTON HEALTHCARE SERVICES, LLC

2. (a) Principal office address of limited liability company: 501 Corporate Centre Drive Suite 600
(Note: **MUST BE STREET ADDRESS**)

Franklin, TN 37067

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

501 Corporate Centre Drive Suite 600

Franklin, TN 37067

April 29, 2016

3. Date of filing/registration in Florida

L16000085623

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

MEGAN MILLER

Registered Office Address:

C/O BRIAN MILLER - 3727 Island Club Drive Apt 117
North Port, FL 34288

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

NEW Registered Agent:

COGENCY GLOBAL INC.

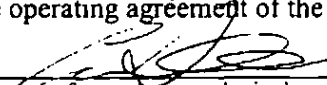
NEW Registered Office Address:

115 North Calhoun St., Suite 4

(**MUST BE FLORIDA STREET 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 of a member or authorized representative of a member

George Abatjoglou

Printed or typed name of signer

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

Sean Honan, Assistant Secretary

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

FILING FEE: \$25.00