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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

submit	s the following statement in order to change	605.0116, Florida Statutes, the undersigned limited liability company get its registered office or registered agent, or both, in the State of
Floridi	ne of the Limited Liability Company:	E HOME HEALTH GROUP, LLC
2. (a)	101 PLAZA REAL SOUTH SUITE 2	
	Principal office address of limited liability com ( <u>Note: MUST BE STREET ADDRESS</u>	
	BOCA RATON, FL 33432	BOCA RATON, FL 33432
	1/17/2025	L25000026081
3.	Date of filing/registration in Florida	a 4. Document number
5. (a)	JOHN NGUYEN, NHAT-HUY	
	Registered Agent and Registered Office shown on the	records of the Florida Dept. of State:
	101 PLAZA REAL SOUTH SUITE 2	213
	Registered Office Address (MUST BE FLORIDA	STREET ADDRESS)
	BOCA RATON	FL 33432
(b)	Capitol Corporate Services, Inc.	······································
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW H</u>	Registered Office address:
	515 East Park Avenue 2nd Fl NEW Registered Office Address:	
	NEW REPARTED OTHER Address;	
	Tallahassee	, FL_32301
the cha agent v was/wc	nge or changes are made, the Florida street ac vill be identical. Or, in the case of a Florida li	er the laws of the State of Florida, it is hereby confirmed that after ddress of the registered office and the business office of the registered limited liability company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise provided in ant of the limited liability company. Joshua Bilmes
Signat	ure of a member or authorized representative of a memb	ber Printed or typed name of signee
provisi the obli to mere	to service of the service of the service of the service of all statutes relative to the proper and constant of my position as registered agent as fy reflect a change in the registered office ad the writing of this change.	t and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and accept s provided for in Chapter 605, F.S. Or, if this document is being filed dress, I hereby confirm that the limited liability company has been
Signature		Brian Radecki, Assistant Secretary on
ទាម្មវាធម្មោ		behalf of Capitol Corporate Services, Inc.
		s• P.O. Box 6327• Tallahassee, FL 32314 LING FEE: \$25,00