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K.SALY EXAMINER MAR 9 2012



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE: 120114 7864759

AUTHORIZATION

COST LIMIT

ORDER DATE: March 6, 2012

ORDER TIME : 11:04 AM

ORDER NO. : 120114-229

CUSTOMER NO: 7864759

CHANGE OF AGENT

NAME: WINTER HAVEN MEDICAL

INVESTORS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 608.416 or 608.508, 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: WINTER I	HAVEN MEDICAL INVESTORS, LLC	
2. (a) Principal office address of limited liability comp (<i>Note: MUST BE STREET ADDRESS</i>)	Cleveland, TN 37312	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SERGE TO THE	
08/22/2000	M0000001671	
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:	C T Corporation System	
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	
•		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>I</u>	NEW Registered Office address:	
NEW Registered Agent:	Corporation Service Company	
NEW Registered Office Address:	1201 Hays Street	
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
If the limited liability company is not organized under that after the change or changes are made, the Florida soffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the article limited liability company.	treet address of the registered office and the business ne case of a Florida limited liability company, it is ed by an affirmative vote of the members of the limited es of organization or the operating agreement of the	
(Signature of a member or authorized representative of a member)		
Maureen Cathell, Authorized Person (Printed or typed name of signee)		
I hereby accept the appointment as registered agent an comply with the provisions of all statules relative to the am familiar with and accept the obligations of my posit F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been noti	nd agree to act in this capacity. I further agree to proper and complete performance of my duties, and I ion as registered agent as provided for in Chapter 608, tachange in the registered office address, I hereby ified in writing of this change.	
By: Again Gugget (Signature of Registered Agent) Corporation Service Company	Sylvia Quannat Acet Vice President	
- Corporation Service Company	Sylvia Queppet, Asst. Vice President	

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