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(Requestor's Name)

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Special Instructions to Filing Officer:

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03/25/05 - 01/12/06 - 01/01/07

# PARANET CORPORATION SERVICES, INC.

3761 Venture Drive Suite 260  
Duluth, Georgia 30096  
800-277-9977 / Fax 800-815-0477

August 25, 2005

2005 AUG 26 AM 10:03  
TALLAHASSEE, FLORIDA

## FILING TRANSMITTAL LETTER

Secretary of State  
Amendment Section  
409 E. Gaines Street  
Tallahassee, FL 32399

Phone: 850-488-9000

**RE: Mid-South Home Care Services, LLC  
Mid-South Home Health Agency, LLC  
Horizon Health Network, LLC  
Hospice of the Emerald Coast, Inc.**

Dear Filing Officer:

Please find the enclosed:

1. Two (2) copies of change of Registered Agent/Office for the above entity;
2. Our check in the amount of **\$25.00** to cover the filing fee; and
3. Self-addressed envelope for return of evidence.

If you have any questions, or require anything further, please contact me toll free at 1-800-277-9977. Thank you for your assistance.

Very truly yours,

Stephanie Thomas

Paranet Job No. 05-08-0392

**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.

FILED  
2009 SEP 26 A 10:03  
TALLAHASSEE, FLORIDA

1. The name of the limited liability company is: Mid-South Home Care Services, LLC
2. The mailing address of the limited liability company is : \_\_\_\_\_  
430 West Main Street, Suite 1, Dothan, AL 36301

3. Date of filing/registration in Florida 09/09/02 4. Document number M02000002352

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CT Corporation System  
Name  
1200 South Pine Island Rd.  
Address  
Plantation, FL 33324  
City, State and Zip

6. The name and address of the new registered agent and/or office:

NRAI Services, Inc.  
Name  
2731 Executive Park Drive, Suite 4  
Florida street address (P.O. Box NOT acceptable)  
Weston FL 33331  
City, State and Zip

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.

x [Signature]  
(Signature of a member or authorized representative of a member)

**H. Anthony Strange, Manager**

(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 608, 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)

Stephanie Thomas, Special Asst. Secy.

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