## M03000002671

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NAME:

CARETENDERS VISITING SERVICES OF DISTRICT 6 LLC

TYPE OF FILING: CHANGE OF AGENT

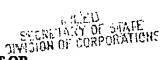
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR 14 0CT 24 AM 9: 24

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:	CARETENDERS	VISITING SERVICES OF DISTRICT 6 LLC	
2. (a) Principal office address of limited li (Note: MUST BE STREET ADD)	9510 ORMSBY STATION ROAD, SUITE 300		
Time. MEGA MAGARESI	<u>,,</u>	LOUISVILLE, KY 40225	
(b) Mailing address of limited liability c (Note: MAY BE POST OFFICE I	company: BOX)	9510 ORMSBY STATION ROAD, SUITE 300	
(Note: MAI BE FUST UFFICE)		LOUISVILLE, KY 40223	
August 12, 2003		M03000002671	
3. Date of filing/registration in Florida	4	. Document number	
5. (a) Registered Agent and Registered O	ffice shown on th	e records of the Florida Dept. of State:	
Registered Agent:		CT Corporation System	
Registered Office Address:		1200 South Pine Island Road	
Rogistorea Cities Flauress.	•	1200 South Pine Island Road	
	•	Plantation, FL 33324	
NEW Registered Agent:		National Corporate Research, Ltd., Inc.  155 Office Plaza Drive	
NEW Registered Office Address:			
<u>(MUST BE FLORIDA STREET ADDRES</u>		156 Office Plaza Drive Talkhassee 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.			
()			
Patrick Todd Lyles, Senior Vice President Printed or typed name of signee	ient		
I hereby accept the appointment as registe comply with the provisions of all statutes rand I am familiar with and accept the oblig Chapter 605, F.S. Or, if this document is baddress, I hereby confirm/that the limited I.		ree to act in this capacity. I further agree to per and complete performance of my duties, itjon as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.	
Signature of Registered Agent Sean Honan, Ass	sistant Secrets		
Division of Cornerations, P.O. Box 6327, Tallahassee, FL 32314			

**FILING FEE: \$25.00** 

INHS18 (12/13)