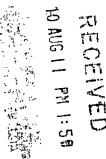
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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B. KOHR

AUG 1 1 2010

EXAMINER



ACCOUNT NO. : I2000000195

REFERENCE :

<u>72</u>720, 7788532

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE : August 9, 2010

ORDER TIME : 10:51 AM

ORDER NO. : 472720-039

CUSTOMER NO: 7788532

CHANGE OF AGENT

NAME: MHG OF PENSACOLA, FLORIDA, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young

EXAMINER'S INITIALS:

ONG 1 AN W 30

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:	MHG OF PENSACOLA, FLORIDA, LLC
2. (a) Principal office address of limited l (Note: MUST BE STREET ADD	MHG OF PENSACOLA, FLORIDA, LLC lability company: 402 Washington Street, Suite 2005 RESS Gainesville, GA 30501
(b) Mailing address of limited liability (Note: MAY BE POST OFFICE	
06/23/2006	M06000003543
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered C	ffice shown on the records of the Florida Dept. of State:
Registered Agent:	CT Corporation System
Registered Office Address:	1200 South Pine Island Rd Plantation, FL 33324
(b) Enter name of <u>NEW Registered As</u> <u>NEW Registered Agent:</u>	gent and/or NEW Registered Office address: Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET A	1201 Hays Street
that after the change or changes are made, to office of the registered agent will be identicated.	nized under the laws of the State of Florida, it is hereby confirmed the Florida street address of the registered office and the business cal. Or, in the case of a Florida limited liability company, it is ere authorized by an affirmative vote of the members of the limited in the articles of organization or the operating agreement of the
Blum Lysh	
Signature of a member or authorized representative of a	nember)
Blanca Lozada, Authorized Person (Printed or typed name of signee)	
I hereby accept the appointment as registe comply with the provisions of all statutes ream familiar with and accept the obligation F.S. Or, if this document is being filed to a confirm that the limited liability company has compared to the company has been accompany to the company of the co	red agent and agree to act in this capacity. I further agree to elative to the proper and complete performance of my duties, and I s of my position as registered agent as provided for in Chapter 608, nerely reflect a change in the registered office address, I hereby as been notified in writing of this change.

(Signature of Registered Agent) Sylvia Queppet, Asst. VP

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

FILING FEE: \$25.00