m07000006104

(Requestor's Name)				
(Address)				
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(Business Entity Name)				
(Document Number)				
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RAChange

05/14/15--01014--024 **25.00



DR 5/20/15



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: May 12, 2015

Order#: 585941-024

Re: AMERI-LIFE AND HEALTH SERVICES OF CENTRAL GEORGIA, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company: AMERI-LIFE AN	D HEALT	TH SERVICES OF CENTRAL GEORGIA, LLC
2.	(a)	4357 Forsyth Road	_ (b)	2650 McCormick Drive
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (-)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 280		Suite 200S
		Macon, GA 31210		Clearwater, FL 33759
		10/10/2007	_	M07000006104
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	Nathan R Hightower Esq.		į
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 2650 McCormick Drive				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
		Suite 200S		FILED THE P
		Clearwater , FL_	33759	FLOST GR
(b)		Corporation Service Company		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office addr	ess:
		1201 Hays Street		
		NEW Registered Office Address:		
		Tallahassee, FL_	32301	
the ag	e cha ent w is/we	mited liability company is not organized under the law- nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited liab- re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he registe oility con the limit	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
		Aughe a dan	Elizat	peth A. Dawson, Authorized Person
	-	ure of a member or authorized representative of a member		Printed or typed name of signee
pro the to	ovisie obli mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.	e to act in performan for in Ch preby con	n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed afirm that the limited liability company has been

Signature of Registered Agent Corporation Service Company

BY: Grace E. Kirby, Asst. VP