Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6386

From:

Account Name : C T CORPORATION SYSTEM

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Fax Number

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC REGISTERED AGENT CHANGE CONCENTRA LABORATORY, L.L.C.

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Electronic Filing Menu

Corporate Filing Menu

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T. HAMPYCA!

COVER LETTER

TO: Registration Section Division of Corporations	
Concentra Laborartory, L.L.C.	
Name	e of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Name of Person	
Firm/Company	
Address	·····
City/State and Zip Code	
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this matter,	please call:
	at () Area Code & Daytime Telephone Number
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	mailing address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	i ananassee, rivilua 323 14
Enclosed is a check for the following	amount:
☐ \$25 Filing Fee	C \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

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. N	ame of the limited liability company: Concentra Labor	artory, l	L.L	.c.	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 5080 SPECTRUM DRIVE	-	(b)	<i>λ.</i>	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX) RUM DRIVE
	1200 WEST TOWER, ADDISON, TX 75001			1200 WEST	TOWER, ADDISON, TX 75001
	10/14/2008			M080000046	
3.	Date of filing/registration in Florida	- 4.	-		Document number
5. (a)	CORPORATION SERVICE COMPANY				
J. (M)	Registered Agent and Registered Office shown on the records of	the Flor	lda	Dept. of State:	•
			_		TASE 15
	Registered Office Address (MUST BE PLORIDA STREET 1201 HAYS STREET	<u>ADDRE</u>	\$37	! 	JUN -
	TALLAHASSEE . FI	2301-2	252	5	ASS -
(b)	C T Corporation System				AH 8: 3
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Qfflee	<u>add</u>	ireas:	ATE ARIOA
	NEW Registered Office Address:				
	1200 South Pine Island Road				
	Plantation	33324			
the cha	imited liability company is not organized under the lange or changes and made, the Florida street address of will be identical for, in the case of a Florida limited line author ledge on affirmative vote of the members of cless of organization or the operating agreement of the	ws of the repability of the limited	he i gist con imi	tered office	and the business office of the registered
Signa	ture of a member or authorized representative of a member	_			Printed or typed name of signee
I herei provisi the obl to mere notified	by actifpt the appointment as registered agent and agens on a distinct the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I is my rifing of this change.	perjor d for in hereby	ma C Co	nce of my d hapter 605, nfirm that t	city. I further agree to comply with the uiles, and I am familiar with and accep F.S. Or, if this document is being filed he limited liability company has been
C I Co By:	roorayon System Altre	ea Y	0	unan	
aignetu:	re of Regist/red Agen Assista				•
	Division of Corporations• P.O. FILING F				ee, FL 32314

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