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(Re	equestor's Name)	 					
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates	of Status					
Special Instructions to Filing Officer:							
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Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscqlobal.com

Date: October 24, 2019

Order#: 999724-016

Re: REGENCY CARE OF BLOUNTSTOWN, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

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: Erika Zavala Daza

c/o Corporation Service Company

251 Little Falls Drive 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: REGENCY CAR	E OF BL	OUNTSTO)WN, LLC		
2	(a)	1978 8TH AVENUE, N.W.	(b)	РОВО	X 1667		
(-)		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)		
		HICKORY, NC 28601		HICKOR'	Y, NC 28603		
		04/05/2010		M1000000	01571		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	CAPITOL CORPORATE SERVICES, INC.					
-/.	(41)	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	::		
		515 EAST PARK AVENUE					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		•		
		2ND FL				4.	·
		TALLAHASSEE FL	32301		· -	<u>.</u>	
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered of 1201 Hays Street NEW Registered Office Address:	Registered Office address:			APY OF STATE	
		Tallahassee .FL	32301				
th ag w th	e cha gent was/we e arti Signat herei covisi e obl mere	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia tree authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law or a member of a light of a member of a light of all statutes relative to the proper and complete proper of a member of a member of a light of a member of all statutes relative to the proper and complete proper of a light of the proper and complete proper of a light of the proper and complete proper of the proper and complete proper of the proper of the provided of the proper of the provided of the proper of the proper of the provided of the proper of the pr	the regist bility confithe limited lim	tered office inpany, it is ted liability ability com filmi, Author	e and the business offices hereby confirmed that y company or as otherwingany. Printed or typed name of signature. I further agree to	te of the re t the chang vise provid	egistered ge(s) ded in
		Tin writing of this change. Likuble The of Registered Agent Corporation Service Company	BY: Gr	ace E. Kir	rby, Asst. Vice Presie	ent	