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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: Meghan Groom meghan.groom@cscglobal.com

Date: February 5, 2021

Order#: 639480-195

Re: HOUSECALL HOME HEALTH, L.L.C.

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: Meghan Groom

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.

I. Na	nne of the limited liability company: HOUSECALL H	OME HE	EALTH, L.L.(C	
2. (a)	3854 AMERICAN WAY SUITE A	(1	(b) 3854 AMERICAN WAY SUITE A		
()	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)			Mailing address of limite (Note: MAY BE POS	• • •
	BATON ROUGE, LA 70816		BATON R	OUGE, LA 70816	
	10/04/2011		M1100000	4994	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CT CORPORATION SYSTEM			_	
, .	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	the Florid	a Dept. of State	··	
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES.	<u>2)</u>	-	
	PLANTATION,	33324			
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	Office ad	dress:	-	
	NEW Registered Office Address:			•	
	1201 Hays Street				
	Tallahassee FI_	32301			2697 53
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liable and affirmative vote of the members of cles of organization or the operating agreement of the ture of a member or authorized representative of a member	registere ability ea of the lim limited l	ed office and ompany, it is nited liability iability com Cilmi, Autho	I the business office hereby confirmed the company or as other pany. rized Person Printed or typed name of	of the registered hat the change(s) erwise provided in
provisi the obl to mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is arriving of this change.	perform l for in (uereby co	ance of my a Thapter 605, Infirm that t	wity. I further agree luties, and I am fami F.S. Or, if this doc he limited liability c	to comply with the liar with and accept ument is being filed ompany has been