Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE CARESOUTH HHA HOLDINGS OF THE TREASURE CO LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

NOV 25 2015

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.

Na	me of the limited liability company: CARESOUTH	IIIIA HOLDIN	GS OF THE TREASURE COAST, LLC		
1)	354 Toney Penna Drive, Suite 3	(b)			
•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Jupiter, FL 33458	Mailing address of limited liability company: (Note: MAX BE POST OFFICE BOX)			
	06/15/2012	M12	2000003412		
ı)	Date of filing/registration in Florida REGISTERED AGENT SOLUTIONS, INC.	4.	Document number		
	Registered Agent and Registered Office shown on the records of 155 OFFICE PLAZA DRIVE, SUITE A	f the Florida Dept	t. of State:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	•		
	TALLAHASSEE ,F	L_32301	29:		
, 	C T Corporation System				
' <u>-</u>	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office address:			
	NEW Registered Office Address:	·····			
	1200 South Pine Island Road		Quantity is a second of the second of th		
	Plantation FI	33324			
an Wj	nited liability company is not organized under the la ge or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited lie authorized by an affirmative vote of the members of organization of the operating agreement of the	f the registered ability compar of the limited l	d office and the business office of the registe ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ty company. berman		
_	re of a mymbel or supporized representative of a member		Printed or typed name of signee		

Division of Corporations • P.O. Box 6327 • Tallahassec, FL 32314 FILING FEE: \$25.00

POWER OF ATTORNEY

NOTICE IS HEREBY GIVEN THAT HealthSouth Home Health Holdings, Inc. ("HealthSouth"), a corporation incorporated under the laws of the state of Delaware and the direct or indirect owner of the subsidiary entities shown on Schedule A attached hereto, does hereby appoint Jennifer Kurtz, Melissa Nolan, Emily Lieberman and Nathan Giffin, employees of CT Corporation and acting solely in the capacity as employees of CT Corporation, as attorney-in-fact for the corporation to act for the corporation and in the corporation's name for the limited purposes authorized herein.

The corporation and the subsidiary entities listed, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to change the corporation's and the subsidiary entities' registered agent and registered office, or the agent and office of similar import, in any state to CT Corporation, as directed and authorized by the corporation.

In the execution of any documents necessary for the sole, limited purpose, set forth herein, Jennifer Kurtz, Melissa Nolan, Emily Lieberman and Nathan Giffin shall exercise the power of Vice President, Secretary, Manager, and/or Member.

This Power of Attorney expires when revoked by the undersigned

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this October 57,2015

A Delaware Corporation

By: Q. P. Whittington

Title: Vice President

State of Alabama
County of Jefferson

On Add B. Carringford a Notani Bublic in and for aid Scale and Scale

On Mt. 5, 205, before me, the undersigned, a Notary Public in and for said State, personally appeared Town. White person(s) whose name(s) is are subscribed to the within instrument and acknowledged to me he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed this instrument.

Witness my hand and official seal.

oten B. Coclee Notary Publi

HealthSouth Home Health Holdings, Inc.

Commission -040714: 11-5-2014

(E, 2CC44123))

EXHIBIT A

CareSouth Health System, Inc. CareSouth HHA Holdings, LLC CS Health & Wellness CareSouth Private Duty Holdings, LLC CareSouth Hospice, LLC CareSouth Private Duty of Georgia, LLC CareSouth Private Duty of South Carolina, LLC CareSouth HHA Holdings of Dothan, LLC CareSouth HHA Holdings of Valley, LLC CareSouth HHA Holdings of Washington, LLC CareSouth HHA Holdings of Gainesville, LLC CareSouth HHA Holdings of Columbus, LLC CareSouth HHA Holdings of Middle Georgia, LLC CareSouth HHA Holdings of Richmond, LLC CareSouth HHA Holdings of Lexington, LLC CareSouth HHA Holdings of Winchester, LLC CareSouth HHA Holdings of South Carolina, LLC CareSouth HHA Holdings of Panama City, LLC CareSouth HHA Holdings of Tallahassee, LLC CareSouth HHA Holdings of Virginia, LLC CareSouth HHA Holdings of Western Carolina, LLC CareSouth HHA Holdings of the Bay Area, LLC CareSouth HHA Holdings of the Treasure Coast, LLC CareSouth HHA Holdings of North Florida, LLC CareServices of the Treasure Coast, LLC CareServices of Bethesda, LLC CareSouth HHA Holdings of Greensboro, LLC

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