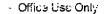
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200267512792

12/19/14--01022--003 **25.00

LLC

12-30-16 De



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

Io: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: December 17, 2014

Order#: 409833-060

Re: SILVER ANGELS HOME CARE OF FLORIDA - JACKSON, 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.

OUCA.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.

(a)			_ (b)	·	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_ `.	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	12201 Bluegrass Parkway		_		
	Louisville, KY 40299		_		
	07/23/2012			M120000	04166
	Date of filing/registration in Flo	rida	4.		Document number
(a)	C T Corporation System				
(b)	Registered Agent and Registered Office shown or	the records of th	ne Florida	Dept. of State	: ::
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				•
	1200 South Pine Island Road				
	Diantetian		00004		
	Plantation	, FL_	33324		景泉 吊 五
	Corporation Service Company			BE 19 B	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	1201 Hays Street				# ti
	NEW Registered Office Address:				;. ` ≠
	Tallahassee	, FL_	32301		
chaint w s/we	mited liability company is not organized nge or changes are made, the Florida stre vill be identical. Or, in the case of a Florice authorized by an affirmative vote of the cles of organization or the openating agree	et address of t ida limited lial ie members of	he regist pility con the limi	tered office npany, it is ted liability	and the business office of the registe hereby confirmed that the change(s) y company or as otherwise provided i
	()26		Dona	a Priebe, A	uthorized Person

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

Signature of Register Agent Corporation Service Company BY: Sylvia Queppet, Asst. Vice President