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United Corporate Services, Inc.

100 State Street, Suite 800
Albany, NY 12207
www.unitedcorporate.com

Toll Free (800)899-8648
Voice (518)694-4414
Fax (518)432-0408

September 10, 2014

RE: MED-EQUIP HOMECARE SERVICES LLC

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To whom it may concern:

Enclosed please find a statement of change of registered agent for the above together with our check to the Florida Department of State for 25.00.

Please file on a routine basis, forwarding a stamped copy as appropriate evidence to the attention of the undersigned, via regular mail.

If there are any corrections or additional fees required to complete this filing, please KEEP these documents in your possession and telephone the undersigned toll free at 1-877-894-9049 for specific instructions.

Thank you.

Sincerely,

Dolores Burton

JK: dab

Enclosure

Our ID # MEDEQ25432

**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. Name of the limited liability company: Med-Equip Homecare Services LLC

2. (a) 6597 Nicholas Blvd, Suite 404 (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Naples, FL 34108-7265

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

10/07/2013

M13000006340

3. Date of filing/registration in Florida

4. Document number

5. (a) Robert Gibbs

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

6597 Nicholas Blvd, Suite 404

Naples, FL 34108-7265

(b) United Corporate Services, Inc.

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

9200 South Dadeland Blvd.-Suite 508

Miami, FL 33156

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Joshua Parnes
Signature of a member or authorized representative of a member

Joshua Parnes

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Michael A. Barr
Signature of Registered Agent

FILED
STATE
DEPT. OF STATE
DIVISION OF CORPORATIONS
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