M1900004857

(Requestor's Name)							
(Address)							
(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:							





400362893264

04/05/21--01038--007 **25.00





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@cscglobal.com

Date: April 1, 2021

Order#: 732109-083

Re: GENEVA HEALTHCARE, 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.

i. N	Same of the limited liability company: GENEVA HE	ALTHCA	\RE	, LLC				
2. (a)	1000 Cedar Hollow Road		(b)	1000 Ce	edar Hollow Road			
- · (···,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0,		Mailing address of limi			-
	Suite 102			Suite 102	2			
	Malvern, PA 19355			Malvern,	PA 19355			
	05/15/2019		i	M1900000	04857			
3.	Date of filing/registration in Florida	4.	-		Document number	ľ		
5. (a	CT CORPORATION SYSTEM							
. ,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1200 SOUTH PINE ISLAND ROAD				te:			
	Registered Office Address (MUST BE FLORIDA STREET	ET ADDR	ESS)		_			
						/ *3 . **	23	
	PLANTATION	FL_3332	4		_	IALL.	2621 AFD	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				_		-5 PH	
	Corporation Service Company						্র জ	'معتدد ''
	NEW Registered Office Address:				_	, '	C 27	
	1201 Hays Street				_			
	Tallahassee	FL_3230	1		_			
chang agent was/w the art Signa I here provise the obto mer	limited liability company is not organized under the e or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member icles of organization or the operating agreement of the flow accept the appointment as registered agent and a ions of all statutes relative to the proper and completing accept the appointment as registered agent as provided or reflect a change in the registered office address, and in writing of this change.	he regist liability s of the l he limite	ered con imit d lia ill Ci	office an apany, it is ed liability con this, Author	d the business offic s hereby confirmed y company or as off npany. prized Person Printed or typed name	e of the r that the c herwise p	egister change rovide	ed (s) d in
Signati	Dage of Registered Agent							

Grace E. Kirby, Asst. Vice President of Corporation Service Company