## N05000000 355

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TALLAHASSEE ELOBOR

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Pure Health Inc.	
(Name of corporation)	
DOCUMENT NUMBER: NOSOOOOO355	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fill	ing.
Please return all correspondence concerning this matter to the following:	
Ethan Bloch (Name of contact person)	
Pure Health Inc.	30 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
3324 West University Ave.	PMB 337
Gaineville, Fl 32607 (City/state and zip code)	· 1
For further information concerning this matter, please call:  Sasha Block at (443, 837 - 4)  (Name of contact person) at (Area code & daytime telephone)	one number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: The Health Inc.	
2. The principal office address: 207 Southeast 2nd Place Apt. 74	
Gainesville, Fl 32601	-
3. The mailing address (if different): 3324 West University Avenue, PMB 337	
Gainesville, F/ 38607	
4. Date of incorporation/qualification: 02/01/2005 Document number: N 6 500000 355	
<ol><li>The name and street address of the current registered agent and registered office on file with the Florida Department of State:</li></ol>	
Sam A. Schwartz	
ument registered best and > 121 Southeast 13th Street Counesville F1 32601	
rest registered office > 3324 West University Avenue, PMB 337, baincoulle, F/ 3260/	vÕ
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Ethan M. Bloch	
207 Southeast 2nd Place Apt. I4 Gainesville, F1 3260	(
(P.O. Box NOT acceptable)	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
Benjamin Wein-drector  (Printed or typed name and title)	
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 obligation of my position as registered agent. Or, of this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Column Hach (Signature of Registered Agent)  August (Date)  August (Date)	. –
If signing on behalf of an entity:	
Ethan Bloch (Typed or Printed Name)	
(Third at Litting Lange)	

\* \* \* FILING FEE: \$35.00 \* \* \*