## NO9000 000 803

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ac                     | idress)            |             |
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| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | usiness Entity Nar | me)         |
| (Dc                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
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## **COVER LETTER**

Amendment Section

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| Division of Corporations  |
|---|
| SUBJECT: BUCACARE, INC.  Name of Corporation  |
| DOCUMENT NUMBER: NO900000803  |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.             |
| Please return all correspondence concerning this matter to the following:                                 |
| Name of Contact Person  |
| SAXON + FINK, LLP<br>Firm/Company   |
| 2)21 PONCE DE LEON BLUO. SUITE 740<br>Address   |
| City/State and Zip Code   |
| E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| KYLE R. SAXON     at (305) 371-9575       Name of Contact Person     Area Code & Daytime Telephone 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Section 617.0502, 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 and registered agent in the State of Florida.

- 1. The name of the Corporation is: BOCACARE, INC.
- 2. The principal office address of the Corporation is: 800 Meadows Road, Boca Raton, Florida 33486.
- 3. The mailing address of the Corporation is: 800 Meadows Road, Boca Raton, Florida 33486.
- 4. The date of incorporation of the Corporation is January 26, 2009, Document Number N0900000803.
- 5. The name and street address of the current registered agent (who has resigned) and the registered office on file with the Florida Department of State is:

Alexander D. Eremia, Esq. 800 Meadows Road Boca Raton, Florida 33486

6. The name and street address of the new registered agent and registered office is:

David R. Friedman, Esq. 6855 Red Road, Suite 600 Coral Gables, Florida 33143

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

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 auties, and I am familiar with and accept the obligations of my position as registered agent.

David R/Friedman, Esq.

June **PO**, 201

The foregoing change was approved by vote of and approved and adopted by the Board of Trustees of BRRH Corporation as the sole owner of, or as the holder of certain reserved powers, directly or indirectly, with respect to, BocaCare, Inc. to become effective on July 1, 2019.

Dated June 28, 2019.

Alexander D. Aremia, Secretary of the Board of Trustees of BRRH Corporation