## N96000001452

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	21 1121 1131
(Cit	ry/State/Zip/Phone	<del>,</del> #)
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03/27/15--01005--019 \*\*35.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

042/5

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sange is submitted for a corporation organized under the laws of the State of $rac{1}{2}$	Florida	
	er to change its registered office or registered agent, or both, in the State of F		
	the corporation: International Association Of Trauma & Addictio		, Inc.
2. The principal	office address: 555 SW 148th Ave - Bldg 4 Sunrise, FL 333	25	
3. The mailing a	address (if different): P.O. Box 551242		
4. Date of incorporation/qualification: 03/12/1996 Document number: N960		0001452	
	d street address of the current registered agent and registered office on file wir rtment of State: (If resigned, enter resigned)	th the	
	Peggy Borovian		
	555 SW 148th Ave - Bldg. 4	15 7	ISIAID SEC
	Sunrise, FL 33325	5 MAR 27	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offi	ice F	CHRECKY FOR
	David Jay Bernstein	8: 40	118 138 130
	660 E. Hillsboro Blvd.	0	莱
	P.O. Box NOT acceptable		
	Deerfield Beach, FL 33441		
The street addro	ess of its registered office and the street address of the business office of its be identical.	registered agent,	
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an o	fficer so	
<i>D</i>	Betty Freeman, CEO		
hereby accept further agreet performalicy of agent. Of if thi	the appointment as registered agent and agree to act in this capacity.  The appointment as registered agent and agree to act in this capacity.  The comply with the provisions of all statutes relative to the proper and company duties, and a un familiar with and accept the obligation of my position as document is being filed merely to reflect a change in the registered office that the eorporation has been notified in writing of this change.	olete as registered	
in to	Attabley Esq. 3/23/20/5	<b></b>	
1	nalf of an entity:		
Ту	ped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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