P00000023814

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FEB 0 5 2015 T. CARTER CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	120000000195

REFERENCE: 490088

AUTHORIZATION : Smell of a con-

COST LIMIT : \$/35.00

ORDER DATE: February 4, 2015

ORDER TIME : 2:41 PM

ORDER NO. : 490088-005

CUSTOMER NO: 4339006

CHANGE OF AGENT

NAME: ONLINE HEALTHNOW, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

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

•	•	617.0502, 607.1508, or 617.1508, Florida Statutes, to	his	
-		n organized under the laws of the State of FL r registered agent, or both, in the State of Florida.		
	the corporation: Online Healthnov			
				 .
2. The principal	office address: 111 Corning Road			
3. The mailing a				
4. Date of incorp		0 Document number: P00000023814		
	d street address of the current regis timent of State: (If resigned, enter	stered agent and registered office on file with the resigned)		
	CT Corporation System			
	1200 South Pine Island Road			
	Plantation	FL 33324	•	
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office	15 FEB	SECRI
	Corporation Service Company		9−4	
	1201 Hays Street		PH	, CS
		Box' NOT acceptable	-*	S
	Tallahassee	FL 32301	5	AIE
The street addre	ess of its registered office and the be identical.	street address of the business office of its registere	ed agent,	
Such change wa	s authorized by resolution duly a te board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.		
Sucque	line Chasen	Jacqueline Chasey, Asst. Sec.		
hereby accept I further agree to performance of agent. Or, if this hereby confirm Corporatio	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not a Service Company	Printed or typed name and little sent and agree to act in this capacity, full statutes relative to the proper and complete in and accept the obligation of my position as registe to reflect a change in the registered office address, tified in writing of this change.	ered , I	
By: Sign	nature of Registered Agent	02.04.15 Date		
_	Courtney Williams			
	sst. Vice President			
	/ped or Printed Name			

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