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REGISTERED AGENT CHANGE

LIFECARE SOLUTIONS EAST, INC.

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## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 11, 2005

LIFECARE SOLUTIONS EAST, INC. 7901 SW 36TH STREET SUITE 206 DAVIE, FL 33328

SUBJECT: LIFECARE SOLUTIONS EAST, INC.

REF: P000000069868

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## HOSO001922163

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SECRETARY OF STATE
ALLAHASSEE, FLORIG

## STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT FOR LIFECARE SOLUTIONS EAST, INC. a Fierida corporation

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.

- The name of the corporation is LifeCare Solutions East, Inc.
- 2. The principal office address of the corporation is 7901 Southwest 36th Street. Suits 206, Davie, Florida 3332B.
- The date of incorporation of LifeCare Solutions Bast, Inc. is July 21, 2000. The corporation was assigned document number P00000069865.
- 4. The name and street address, including street and number, of the corporation's present registered agent and registered office as shown in the records of the Fiorida Department of State prior to filing this statement is Jeanne Van Ryk, 1350 East Newport Center Drive, Suite 100, Described Beach, Fiorida 33442.
- 5. The name and error address, including street and number, to which the corporation's registered agant and registered office is to be changed in Brian Substano, 7901 Southwest 35th Street, Suite 206, Davie, Florida 33328.
- 6. The sweet address of the corporation's registered office and the sweet address of the business office of the corporation's registered agent, as changed, will be identical.
  - Such change Was authorized by the perpendients heard of directors.

EXECUTED this Tay of August, 2005.

LIFECARE SOLUTIONS BAST, INC.

By:

she Ambrose, Chief Executive Officer

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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, if 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.

LIFECARE SOLUTIONS BAST, INC.

August <u>/0</u>, 2005

By:

Brian Sabataso, Registered Agont

STATEMENT OF CHANGE OF REGISTERED AGENT

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