

P02000041062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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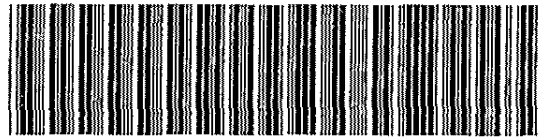
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA 209  
MD 9/12/04

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Guardian Home Health Care Nursing Services;  
(Name of corporation)

DOCUMENT NUMBER: 902000041042

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:

James Metz  
(Name of contact person)

Guardian Home Health Care Nursing Services, Inc.  
(Firm/Company)

301 W. Boynton Bch Blvd Ste 9  
(Address)

Boynton Bch, FL 33426  
(City/state and zip code)

For further information concerning this matter, please call:

James Metz at (414) 839-6815  
(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  
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: Guardian Home Health Care Nursing Service
2. The principal office address: 1301 W. Boynton Beach Blvd STE 9 I  
Boynton Beach, Florida 33426
3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 04-16-02 Document number: 902000041062

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Pamela Sawyer  
1301 W. Boynton Beach Blvd STE 9  
Boynton Beach, FL 33426

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

James A. Metz.  
1301 W. Boynton Beach Blvd.  
(P.O. Box NOT acceptable)  
Boynton Beach, FL 33426

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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.

Pamela Sawyer  
(Signature of an officer or director)

Pamela Sawyer - President  
(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, 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.*

(Signature of Registered Agent)

8-27-04  
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314