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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED AND FILED

C. LEWIS 2013

C. LEWIS

OCT 17 2013

EXAMINER

COVER LETTER

TO: Amendment Section **Division of Corporations**

AtlantiCare Nursing Services, Inc.

Name of Corporation

P02000063866

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:

Bruce Catanzaro

Name of Contact Person

AtlantiCare Nursing Services, Inc.

Firm/Company

7700 Congress Ave., Ste. 2109

Address

Boca Raton, FL 33487

City/State and Zip Code

catanzarob@msn.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bruce Catanzaro

Name of Contact Person

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502 ange is submitted for a corporation organi. er to change its registered office or register	zed under the laws of the State of Florida	· <u> </u>		
	the corporation: AtlantiCare Nursing	•			
2. The principal	7700 0 4				
2. The principal	Boca Raton, FL 33				
3. The mailing a	address (if different): 7700 Congress	Ave., Ste. 2109			
	Boca Raton, FL				
4. Date of incor	poration/qualification: 6/10/02	Document number: P02000063	3866		
5. The name and	d street address of the current registered ag rtment of State: (If resigned, enter resigned				
	Bruce Catanzaro				
	14000 S. Military Tr., Ste. 108	3	SEC	<u>ئ</u>	
	Delray Beach, FL 33484			<u> </u>	
6. The name and (if changed):	d street address of the new registered agen	t (if changed) and /or registered office	~~~	- q AM 10:	
	Bruce Catanzaro		TATE ORID	: 32	
	7700 Congress Ave., Ste. 2109				
	P.O. Box NOT a	acceptable			
	Boca Raton, FL 33487				
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its regis	tered agent	*9	
Such change wathorized by t	as authorized by resolution duly adopted he board, or the corporation has been not	by its board of directors or by an officer ified in writing of the change.	: so		
Signati	ire of an officer or director	Bruce Catanzaro			
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and to comply with the provisions of all statu my duties, and I am familiar with and act is document is being filed merely to reflet that the corporation has been notified in grature of Registered Agent	l agree to act in this capacity. tes relative to the proper and complete except the obligation of my position as re except the obligation of my position as re-	gistered ess, I		
·	chalf of an entity:	Date			
BRUC	·				
	Typed or Printed Name				

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