PD2000016115

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(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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04/13/15--01025--013 **35.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

RA/RO/Ch8



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: April 10, 2015

Order#: 570669/005

Re: AMBIENT HEALTHCARE OF S. FLORIDA, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of ch	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida 2 on organized under the laws of the State of or registered agent, or both, in the State of I	FL
	-	THCARE OF S. FLORIDA, INC.	тогии.
2. The principa			
3. The mailing	address (if different):		
4. Date of inco	rporation/qualification: 07/12/200	Document number: P020000	076115
	nd street address of the current reg artment of State: (If resigned, ente	istered agent and registered office on file war resigned)	ith the
	OVERMEYER GEORGE J		
	15851 SW 41 STREET		SECRI VISION
	DAVIE	FL 33331	SECRETARY OF COR
6. The name an (if changed):	——————————————————————————————————————	ered agent (if changed) and /or registered of	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Corporation Service Company		= = =
	1201 Hays Street		
	P.O. Tallahassee	Box NOT acceptable FL 32301	
	ress of its registered office and th I be identical.	e street address of the business office of its	
Such change wathorized by t	vas authorized by resolution duly the board, or the corporation has	adopted by its board of directors or by an been notified in writing of the change.	officer so
10	26 2	Dona Priebe	Vice President
I hereby accep I further agree performance o agent. Or, if thereby confirm Corporation	to comply with the provisions of f my duties, and I am familiar wit	Printed or typed name and title agent and agree to act in this capacity. Fall statutes relative to the proper and come the and accept the obligation of my position y to reflect a change in the registered offication of my writing of this change. April 02, 2015 Date	iplete i as registered
	ehalf of an entity:		
	, Assistant Vice President		
	Typed or Printed Name	_	

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