

P0300000769

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000359159 3)))



H180003591593ABC8

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please\*\*

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
COMPLETE REHAB AND MEDICAL CENTERS OF  
POMPAHO, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

FILED

SECRETARY OF STATE  
TALLAHASSEE, FL

2018 DEC 19 PM 2:14

RECEIVED

Handwritten signature/initials

**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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Complete Rehab Medical Centers of Pompano, INC
2. The principal office address: 150 S ANDREWS AVENUE, SUITE 440, POMPANO BEACH, FL 33069
3. The mailing address (if different): PO BOX 741235, BOYNTON BEACH, FL 33474
4. Date of incorporation/qualification: 01/03/2003 Document number: P03000000769
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

PHYSICIANS FIRST MANAGEMENT SERVICE ORGANIZATION, LLC

325 SW 14TH AVENUE #3

POMPANO BEACH, FL 33069

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

Corporate Creations Network Inc.

11380 Prosperity Farms Road #221E

P.O. Box NOT acceptable

Palm Beach Gardens, FL 33410

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.

[Signature]  
Signature of an officer or director:

Caitlin Lazarus, Attorney-in-Fact

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]  
Signature of Registered Agent

12/19/2018

Date

If signing on behalf of an entity:

Caitlin Lazarus, Special Secretary

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

FILED  
2018 DEC 19 AM 9:36  
TALLAHASSEE, FLORIDA