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(R	equestor's Name)				
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(C	ity/State/Zip/Phone	#)			
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PICK-UP	☐ WAIT	MAIL			
(B	usiness Entity Name	9)			
(D	ocument Number)				
Cartified Carios	Cartificator	of Status			
Certified Copies Certificates of Status					
Special Instructions to	Filing Officer:				
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DEPAST METERS OF STATE

OF STATE

R.A. Charge

C. Coulliette OCT 0 1 2007



	ACCOUNT NO.	:	07210000	0032		
	REFERENCE	:	237744	109186B		
	AUTHORIZATION	:		Louble	•	
	COST LIMIT	:	\$ 35	mulle ma		
	September 20, 20	 07		• • • • • • • • • • • • • • • • • • •		
ORDER TIME :	10:21 AM					
ORDER NO. :	237744-625					
CUSTOMER NO:	109186B					
. <u>CHANGE OF AGENT</u>						
NAME:	LAKE WALES HO	SPI'	TAL INVES	TMENT		
	THE FOLLOWING AS	PR	OOF OF FI	LING:		
XX PLAIN	STAMPED COPY					
CONTACT PERSO	N: Harry B. Davi	s -				
			EXAMINED	•		

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

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organize		
in order to change its registered office or registere		
1. The name of the corporation: LAKE WALES HOSPITA	AL INVESTMENT CORPORATION	
2. The principal office address: 4000 Meridian Blvd.	, Franklin, TN 37067	
3. The mailing address (if different):		
4. Date of incorporation/qualification: 01/11/2006		
5. The name and street address of the current registered ager Florida Department of State:	nt and registered office on file with the	
NRAI Services, Inc.		
2731 Executive Park Drive		
Weston, FL 33331	SECRI	07 OC
6. The name and street address of the new registered agent ((if changed):	(if changed) and /or registered office AHASSEE, FI. C	<u>-</u>
Corporation Service Company)F S	PH -:
1201 Hays Street	STATE LORID	90:
(P.O. Box NOT acceptable)	Þ	
Tallahassee, FL 32301		
The street address of its registered office and the street ad as changed will be identical.	ldress of the business office of its registered agent,	
Such change was authorized by resolution duly adopted by authorized by the board of the corporation has been notif	by its board of directors or by an officer so fied in writing of the change.	
(Signature of air officer or director)	Elizabeth A. Dawson, Attorney In Fact (Printed or typed name and title)	
I hereby accept the appointment as registered agent and a l further agree to comply with the provisions of all statute of my duties, and I am familiar with and accept the obligated document is being filed merely to reflect a change in the recorporation has been notified in writing of this change. Corporation Service Company	agree to act in this capacity. 2s relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the	2 5
By: Conature of Reginered Agent)	09/11/2007	
(Sonature of Reginered Agent) If signing on behalf of an entity:	(Date)	
(Typed or Printed Name)		

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