

P06000022974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

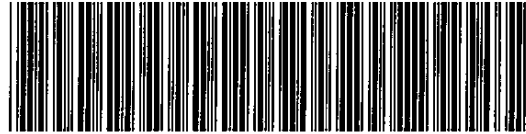
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APPROVED
AND
FILED

07 OCT 16 AM 8:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Charge

C. Goulette OCT 19 2007

ROSS LANIER & DEIFIK, P.A.

TIB Financial Center
599 Ninth Street North
Suite 300
Naples, Florida 34102

Donald K. Ross, Jr.
Masters of Law in Taxation
Suzanne D. Lanier
Board Certified Marital and Family Lawyer
Celia Ellen Deifik
Board Certified Real Property Lawyer

Telephone: 239/262-6161
Telefax: 239/434-0339

October 10, 2007

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: A + Homehealth, Inc.

To Whom It May Concern:

Enclosed please find a Cover Letter Statement of Change of Registered Office or Registered Agent or Both for Corporations and our firm check #21616 in the amount of \$35.00 for recording fees. I have also enclosed a copy of same for a time stamp and thereafter, return to me in the enclosed self addressed stamped envelope.

Should you have any questions, please do not hesitate to contact our office. I remain,

Very truly yours,

ROSS LANIER & DEIFIK, P.A.



Lyn Dukes
Direct Line: 239-280-4173
LDukes@NaplesAttorney.net

Enclosures: as noted
cc: Client & file
I:\LDukes\Crudo\L-DCrudo - Dept of State-10-10-07.doc

**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: A + Homehealth, Inc.
2. The principal office address: 25150 Bernwood Dr., Suite 16, Naples, Bonita Springs, FL 34135
3. The mailing address (if different): 27079 Mathesson Ave., Unit 101, Bonita Springs, FL 34135
4. Date of incorporation/qualification: February 14, 2006 Document number: P06000022974
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Danny Crudo

27079 Mathesson Ave., Unit 101, Bonita Springs, FL 34135

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

Donald K. Ross, Jr.

599 9th St No Ste 300

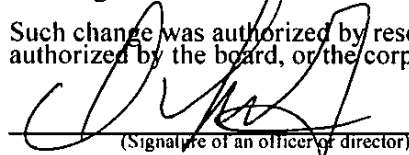
(P.O. Box NOT acceptable)

Naples, FL 34102

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

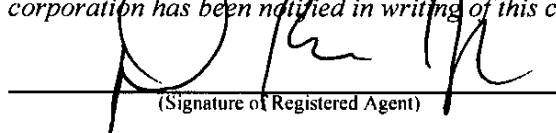
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Danny Crudo

(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)

10/10/07

(Date)

If signing on behalf of an entity:

(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 (8/05)

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A + Homehealth, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000022974

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:

Lyn Dukes
(Name of Contact Person)

Ross Lanier & Deifik, PA
(Firm/Company)

599 9th St No Ste 300
(Address)

Naples, FL 34102
(City/State and Zip Code)

For further information concerning this matter, please call:

Lyn Dukes at (239) 280-4173
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301