Document Services

ACCOUNT FILING LOVER SHEET
ACCOUNT NUMBER: FCA 000000005
REFERENCE: 2010263 (SUB ACCT.)
DATE:
REQUESTER NAME: LEXIS DOCUMENT SERVICES
REQUESTER NAME: LEXIS DOCUMENT SERVICES ADDRESS: P.O. BOX 2969 SPRINGFIELD, ILLINOIS 62708 CONTACT NAME: CYNTHIA WOODYARD (904) 877-7296
CONTACT NAME: CYNTHIA WOODTARD (904) 877-7290
CORPORATION NAME: Arbor Health Care Company
AUTHORIZATION: C. Woodyard
CERTIFIED COPY (1-9) CERTIFICATE OF STATUS (1-9) PLAIN STAMPED COPY
() CALL WHEN READY () CALL IF PROBLEM () AFTER 4:30 WALK IN () WILL WAIT () PICK-UP

Florida Department of State, Sandra B. Mortham, Secretary of State

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

	es, or
1a. The name of the corporation is: Arbor Health Care Company	
1b. The mailing address of the corporation is:1100 Shawnee Rd., P.O. Box 840	
Lima, OH 45802	
1c. Date of incorporation: 8-6-85 Document number: 006980	
2. The name and address of the current registered agent and office:	
John S. Inglis	71
2. The name and address of the current registered agent and office:	
Tampa. FL 33602	圣
3. The name and address of the new registered agent and office:(P.O. Box Not Acceptable)	1: 28
Lexis Document Services Inc.	
3953 WW Kelley Road	
Tallahassee, FL 323 1	
The street address of its registered office and the street address of the business office of registered agent, as changed, will be identical.	its
Such change was authorized by resolution duly adopted by its board of directors or by an office so authorized by the board.	er
(Signature of an officer, chairman or vice chairman of the board) (Date)	
Roch Carter, Vice President	
(Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the above state corporation, I hereby accept the appointment as registered agent and agree to act in this capacily 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 registered agent.	ed ty. te as
time Finaltina 2298	
(Signature of Registered Agent) (Date)	
f signing on behalf of an entity:	
Terry Ferrentino Key Corp. Adm. (Typed or Printed Name) Key Corp. Adm.	