P12000077492

(Re	equestor's Name)		
(Address)			
(Address)			
(Cir	ry/State/Zip/Phone	<u>, #1</u>	
<u></u>	WAIT	MAIL	
	· · · · · · · · · · · · · · · · · · ·		
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
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Office Use Only



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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

llockar2@cscinfo.com

Date: July 30, 2014

Order#: 233467/001

Re: AMERICA'S HEALTH GROUP 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 cha	nge is submitted for a corporation organ	nized under the laws of the State of FL ered agent, or both, in the State of Florida.
	the corporation: AMERICA'S HEALTH G	
2. The principal 5066 NW 10	office address: 4TH AVE, CORAL SPRINGS FL 33076	3
3. The mailing a	ddress (if different):	
4. Date of incorp	corporation/qualification: 09/12/2012 Document number: P12000077492	
	d street address of the current registered a timent of State: (If resigned, enter resigned	agent and registered office on file with the ed)
	Jason B. Price	
	5066 NW 104TH AVE	FL 33076
	CORAL SPRINGS	FL 33076
6. The name and (if changed):	l street address of the new registered age	ent (if changed) and /or registered office
	Corporation Service Company	(n
	1201 Hays Street	
	P.O. Box NOT acceptable	
	Tallahassee	FL 32301
The street addre	ess of its registered office and the street be identical.	address of the business office of its registered agent,
Such change was authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been no	d by its board of directors or by an officer so tified in writing of the change.
1		Dona Priebe, Vice President
ilgnati	re in a officer or director	Printed or typed name and title
I further agree performance of agent. Or, if th hereby confirm	my duties, and I am familiar with and a	tutes relative to the proper and complete accept the obligation of my position as registered lect a change in the registered office address, I
By: X	ace C-Kubie	07/29/2014
Sig	nature of Registered Agent	Date
If signing on be	half of an entity:	
Grace E. Kirby	, Assistant Vice President	
T	yped or Printed Name	

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