

P15000000506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

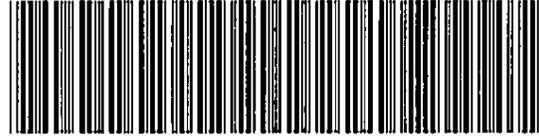
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AUG 22 2023

2023 AUG 21 PM 4:42

FALLAHASSEE, FLORIDA

2023 AUG 21 AM 11:19

RECEIVED

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 945805 7121801
AUTHORIZATION : 
COST LIMIT : \$ 35.00

ORDER DATE : August 18, 2023
ORDER TIME : 9:33 AM
ORDER NO. : 945805-005
CUSTOMER NO: 7121801

CHANGE OF AGENT

NAME: RHS HEALTHCARE SOLUTIONS INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyllena Baker -- EXT#

EXAMINER: _____

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: RHS Healthcare Solutions Inc.
- 2. The principal office address: 8952 Western Way, Suite 20, Jacksonville, FL 32256
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 01/02/2015 Document number: P15000000506
- 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)

Alex Kleiman
8952 Western Way, Suite 20
Jacksonville, FL 32256

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

Corporation Service Company
1201 Hays Street
Tallahassee FL 32301
P.O. Box NOT acceptable

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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.

Alex Kleiman
 Signature of an officer or director

Alex Kleiman PRESIDENT
 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.

Corporation Service Company
 By: *Eylina Ochoa*
 Assistant Vice President
 Signature of Registered Agent

08/21/2023
 Date

If signing on behalf of an entity:

 Typed or Printed Name

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