## P1500078733

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C. GOLDEN
JUN 0 5 2017



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell tecora.bell@cscglobal.com

Date: May 26, 2017

Order#: 635632/211

Re: SHERIDAN CHILDREN'S SERVICES OF ALABAMA, 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:Tecora Bell 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

•	•	.0302, 607.1308, or 617.1308, Florida rganized under the laws of the State of	
		gistered agent, or both, in the State of	
1. The name of t	he corporation: SHERIDAN CHILDS	REN'S SERVICES OF ALABAMA, INC	2.
	SUNRISE BOULEVARD MAILSTO		
3. The mailing a	ddress (if different):		<del>.</del>
4. Date of incorp	poration/qualification: 09/23/2015	Document number: P15000	0078733
5. The name and		ed agent and registered office on file v	
	MARCUS JILLIAN		
•	7700 WEST SUNRISE BOULEVAR	RD	2017 SEC
	PLANTATION	FL 33322	FII 117 MAY 3 SECRETAT ALLAHAS
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or registered o	
	Corporation Service Company	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	<b>L: 41</b> ORID
	1201 Hays Street		<b>&gt;</b> *
		NOT acceptable	
	Tallahassee	FL 32301	_
The street addre	ss of its registered office and the str be identical.	reet address of the business office of i	its registered agent,
Such change wa authorized by th	s authorized by resolution duly ado e board, or the corporation has been	pted by its board of directors or by an inotified in writing of the change.	officer so
Xiel C	almi	Jill Cilmi, Vice President	
I hereby accept I further agree to performance of agent. Or, if this hereby confirm	te of an officer or director the appointment as registered agen o comply with the provisions of all . my duties, and I am familiar with ar	Printed or typed name and to t and agree to act in this capacity. statutes relative to the proper and count and accept the obligation of my position reflect a change in the registered offi	mplete on as registered
By: Lino	ce Cokuble	05/25/2017	
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	Asst. Vice President		
Ty	ped or Printed Name		

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