Document Number Only C T CORPORATION SYSTEM Requestor's Name 660 East Jefferson Street Address Tallahassee, Florida 32301 City State Zip Phone 904-222-1092 **CORPORATION(S) NAME** Pinnacle Rehabilitation, Inc. () Profit () NonProfit () Amendment () Merger () Limited Liability Company () Dissolution/Withdrawal () Foreign () Mark () Limited Partnership () Annual Report ( ) Other () Reinstatement Change of R.A. () Reservation () Fictitious Name () CUS/ G/S () Certified Copy () Photo Copies () Call When Ready () After 4:30 () Call if Problem 🗑 Walk In () Will Wait Pick Up () Mail Out Name Availability 3-26-97 PLEASE RETURN EXTRA COPY(S) Document FILE STAMPED Examiner Updater Veriller Acknowledgment

W.P. Verifler

CR2E031 (1-89)

## Florida Department of State, Jim Smith, Secretary of State

## 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, the undersigned corporation organized under the laws of the State of Tennessee submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.	
1a. The name of the corporation is: Pinnacle Rehabilitation, Inc.	
1b. Date of incorporation 10-25-88 Document number	
2. The name and address of the current registered agent and office:  The Prentice-Hall Corporation System, Inc.	
1201 Hays St., Ste. 105, Tallahassee, FL 32301	
3. The name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  C T CORPORATION SYSTEM	
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Florida 33324	4
The street address of its registered agent 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.	
SIGNATURE Salvina Amenta-Gray, Asst. Secy.  Signature Typed or printed name and title	
3-21-97 DATE	
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.  SIGNATURE BY: OF CORPORATION SYSTEM AGENT.	1
(Registered Agent)	Γ

Division of Corporations, P.O. Box 6327, Taliahassee, FL 32314

3-21-97

CR2E045 (7-91)

FILING FEE: \$35.00