P35438

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SECRETARY OF STATE

AND ARREST FORDA



RA. Change

G. Gordilette | OCT | 4, 2005



ACCOUNT NO. : 072100000032

REFERENCE : 644956

AUTHORIZATION : atricia lui

COST LIMIT : \$ 35.00

ORDER DATE: October 11, 2005

ORDER TIME : 10:19 AM

ORDER NO. : 644956-235

CUSTOMER NO: 5022885

CHANGE OF AGENT

NAME:

CORAM HEALTHCARE CORPORATION

OF FLORIDA

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

EXAMINER'S INITIALS:

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

statement of change	isions of sections 607.0502, 617.0502 is submitted for a corporation organiz change its registered office or register	zed under the laws of the State o	Melaware
1. The name of the or	orporation: CORAM HEALTHCARE CO	RPORATION OF FLORIDA	
2. The principal office	e address: 6204 Benjamin Road,	#200, Tampa, FL 33634	
3. The mailing address	ss (if different): 1675 Broadway,	#900, Denver, CO 80202	
4. Date of incorporate	ion/qualification: Sept. 9, 1991	Document number: P3543	38
5. The name and stree Florida Department	et address of the current registered ago t of State:	ent and registered office on file	with the
NRA	I Services, Inc.		
2731 Executive Park Drive, Suite 4			
Wes	ton, FL 33331		CTI
6. The name and stree (if changed):	et address of the new registered agent	(if changed) and /or registered of	FILED 05 OCT 14 PM 12: 26 SECRETARY OF STATE FLORIDA 1 E
Cor	poration Service Company		- 26 PATE PARE
120	1 Hays Street		
	(P.O. Box NOT acceptable)		
Tal:	lahassee, FL 32301		·
The street address of as changed will be in	its registered office and the street a lentical.	ddress of the business office of	f its registered agent,
Such change was autauthorized by the bo	horized by resolution duly adopted ard, or the corporation has been not	by its board of directors or by ified in writing of the change.	an officer so
Maure	rlulle	Maureen Cullen, Attorn	ney In Fact on
I hereby accept the a I further agree to co of my duties, and I a document is being fil corporation has beel	n officer or director) appointment as registered agent and inply with the provisions of all statut m familiar with and accept the obliged merely to reflect a change in the notified in writing of this change.	(Printed or typed name a behalf of Michael E. Del agree to act in this capacity, tes relative to the proper and cation of my position as registe registered office address, I her	nd title) 11, Vice President complete performance cred agent. Or, if this reby confirm that the
By Michell	Service Company Of Registered Agent)	(Date)	2005
If signing on behalf e	of an entity:		
Michelle R. Van	noy, Asst. Vice Pres.		
(Typed o	r Printed Name)		

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