P38712

(Re	equestor's Name)		
	ddress)		
(***	udiess)		
(Address)			
	ity/State/Zip/Phone	a #/\	
(0)	cyrotate/2ip/11lone	- # <i>)</i>	
PICK-UP	WAIT	☐ MAIL	
(Br	usiness Entity Nar	ne)	
(UX	ocument Number)		
Certified Copies	Certificates of Status		
Special Instructions to	Filing Officer:		
¦			
theper Dio	ine_		
1			

Office Use Only



700378887197

01/05/24--01016--002 **\$00.00

2022 JAN -5 AM 7: 11 SECREJARY OF STATE

O SIMMONS FEB 0 1 2022

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: INTERNATIONAL REHABILITATIVE SCI Name of Corporation	ENCES, INC.			
DOCUMENT NUMBER: P38712				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter	er to the following:			
JOELLE CHURIK				
Name of Contact Person				
UNIEARCH, INC.	_			
Firm/Company				
1990 MAIN STREET, STE 750-709				
Address				
SARASOTA, FL 34236				
City/State and Zip Code				
UNISOP@UNISEARCH.COM				
E-mail address: (to be used for future annual repo	rt notification)			
For further information concerning this matter, please	call:			
JOELLE CHURIK	at (888)617-4478 Area Code & Daytime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	nge is submitted for a corporation o	1.0502, 607.1508, or 617.1508, Florida Statutes, the State of DELAWA! The properties of the State of Florida.			
1. The name of	the corporation: INTERNATIONAL	REHABILITATIVE SCIENCES, INC.			
2. The principal	1. The name of the corporation: INTERNATIONAL REHABILITATIVE SCIENCES, INC. 2. The principal office address: 14001 SE First StreetVANCOUVER, WA 98684				
3. The mailing a	address (if different): 14001 SE First	StreetVANCOUVER, WA 98684			
4. Date of incorp	poration/qualification: 05/05/1992	Document number: P38712			
	d street address of the current register trment of State: (If resigned, enter re-	red agent and registered office on file with the signed)			
	UNISEARCH, INC.	17 03 03 8	2022 JAN		
	155 OFFICE PLAZA DRIVE	EED ALLA	1		
	TALLAHASSEE, FL 32301		, इयस्य		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
	UNISEARCH, INC.				
P.O. Box NOT acceptable SARASOTA, FL 34236					
					The street address changed will
		opted by its board of directors or by an officer so en notified in writing of the change.			
Signatu	re of an officer or director	Printed or typed name and title			
I further agree of my duties, ar document is be	the appointment as registered ages to comply with the provisions of all and I am familiar with and accept the ing filed merely to reflect a change s been notified in writing of this cha	statutes relative to the proper and complete per cobligation of my position as registered agent. (in the registered office address, I hereby confirn	formance Or, if this n that the		
\wedge	alle Unil	11/15/2021			
Si	nature of Registered Agent	Date			
If signing on be	half of an entity:				
	IK, ASST. SECRETARY				
ŀ	yped or Printed Name				

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