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## Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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## REGISTERED AGENT CHANGE

INNOVA HEALTH, INC.

Certificate of Status	0
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## 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 Florida
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
T PWI.
1. The name of the corporation: <u>INNOVA HEALTH</u> , INC.
2. The mailing address of the corporation: 1200 University Blvd., #101
Jupiter, FL 33458
3. Date of incorporation/qualification: 5/18/94 Document number: P94000038615
4. The name and address of the current registered agent and office:
Douglas Weary
1200 University Blvd #101 Second Seco
Jupiter, FL 33458
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  (P. O. Box Not Acceptable)
1200 University Blvd., #101
Tunitan T On
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
(Signature of an origin chairman or vice chairman of the board)
Subhash _Kapur, President
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation. I hereby accept the appointment as registered agent and agree to act in this capacity. Further agree to comply with the provisions of all statutes relative to the proper and complete segistered agent.  The proper and complete segistered agent.
(Signature of Registered Avent)
(Signature of Registered Agent) Alvin Ponce de Leon (Date)  (Signature of Registered Agent) (Date)
(Typed or Printed Name) (Capacity)
· · ·
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