RAB

310 WEST FIRST STREET
P.O. BOX 1620
STUART, FL 34995

ATTORNEY &

State of Florida Division of Corporation Post Office Box 6327 Tallahassee, Florida 32314

RE: Shipe's Homecare Connection, Inc.

Dear Ladies:

June 29, 1999

Enclosed please find Statement of Change of Registered Office or Registered Agent or Both for Corporations to be filed with the State of Florida.

Also, enclosed please find check number 4040, in the amount of \$35.00, to cover filing fees.

Should you have any questions, please do not hesitate to contact this office.

Sincerely yours,

ROBERT A. BURSON, P.A.

Monique I. McCall Legal Secretary

Encl.

f:\e\business.b-s\interact\99-138\state.01

99 JUL -9 PM 1: 13

paso ser a

*****35.00

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

submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation is: Shipe's Home Care Connection, Inc.				
	-	3 4 . 2 1 3 3 1 1 1		
2. The mailing address of the corporation is: 109 W.S.	Park Street, 0	keechobee,	FL 3	34972
			———	- See
3. Date of incorporation/qualification: 11-13-1995	Document nu	mber: <u>P95</u>	000086	659
4. The name and address of the current registered agent and	d office			
			ا بر تختی	99
STUART SHIPE	-		ECH FCH	
10600 PINE CONE LANE	_		天	
			SSE YRY	ပ် ြ
5. The name and address of the new registered agent and of	Y . (D O D)	<u> </u>		PH [
and or	nce: (P. O. Box No	t Acceptable)	<u></u> [
Keven McAdams, II		- :		္ထ
761 North Federal Highway			>	
		<u></u>		
Stuart, Florida 34994		<u></u>		
The street address of its registered office and the street acagent, as changed, will be identical.	idress of the busine	ess office of	its regi	stered
Such change was authorized by resolution duly adopted by				
Such change was authorized by resolution duly adopted by the board.			n office	er so
Pus	_	Toly 7	1000	
(Signature of an officer, chairman or vice chairman of the board)		(Date)	1999	<u>·.</u>
Vowin Modeland TT D		_		
Keyin McAdams, II, President (Printed or typed name and title)				·
laving been named as registered agent and to accept ser	vice of museum for	42 . 7		
orporation, I hereby accept the appointment as registere further agree to comply with the province.	d agent and agree	tne above sto to act in this	xted : canac:	itv
laving been named as registered agent and to accept ser orporation, I hereby accept the appointment as registere further agree to comply with the provisions of all statute erformance of my duties, and I am familiar with and acceptstered agent.	s relative to the pro ept the obligation i	oper and cor	nplete	···.
gisierea agem.	-prince congunion	ıj my positio . →	n as	
	JUI	1_1	1000	
(Signature of Registered Agent)	(Date) — — — — — — — — — — — — — — — — — — —	1999	
signing on behalf of an entity:				
(Typed or Printed Name)				

DIVISION OF CORPORATIONS

CR2E045(7/97)

P.O. Box 6327

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

TALLAHASSEE, FL 32314