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SECRETARY OF STATEMS

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Vitalcare Group, Inc. (Name of Corporation)
DOCUMENT NUMBER: P97000055 890
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Maximilian Schenk, Esq. (Name of Contact Person)
Schenk & Associates, PLC (Firm/Company)
999 Brickell Ave. Ste. 700 (Address)
Migni, Florida 33131 (City/State and Zip Code)
For further information concerning this matter, please call:
Maximilian Schenk at (305) 444-2200 (Name of Contact Person) (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: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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, this statement of change is submitted for a corporation organized under the laws of the State ofin order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Vital care Group, Inc.
2. The principal office address: 8935 NW 37 th St.
Miami, Florida 33172
3. The mailing address (if different): as above
4. Date of incorporation/qualification: 06-24-1997 Document number: P97000055890
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Incorp Services, Inc.
17888 67th Court North
Loxahatchee, Florida 33470
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Schenk & Associates, PLC 999 Reschall Associates
Schenk & Associates, PLC
(PO Box NOT acceptable)
Miami, Florida 33131 23
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 charge was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the draid, of the corporation has been notified in writing of the change.
Richard Admani VP (Printed or typed name and title)
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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent) (Date)
By: Maximilian Schenk, Menesing Member If signing on behalf of an entity: (Date)
Schenk & Associates, PLC (Typed or Printed Name)

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