

P97000070629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

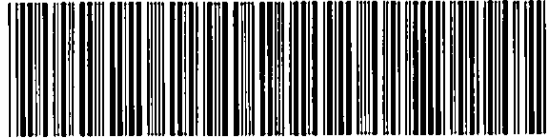
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 FEB 16 A 11:02
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FEB 18 2018

T. LEHEUX

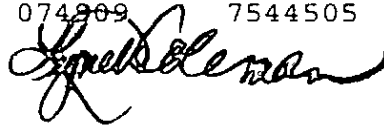
2410

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 074909 7544505

AUTHORIZATION :



COST LIMIT : \$ 35.00

ORDER DATE : February 16, 2018

ORDER TIME : 2:49 PM

ORDER NO. : 074909-005

CUSTOMER NO: 7544505

CHANGE OF AGENT

NAME: CHIRO ALLIANCE CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CHIRO ALLIANCE CORPORATION
Name of Corporation

DOCUMENT NUMBER: P97000070629

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:

Paula Brown

Name of Contact Person

eviCore healthcare

Firm/Company

400 Buckwalter Place Boulevard

Address

Bluffton, SC 29910-5150

City/State and Zip Code

pbrown@evicore.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paula Brown

800

918-8924 ext. 27382

at ()

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 of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CHIRO ALLIANCE CORPORATION
2. The principal office address: 400 Buckwalter Place Boulevard
Bluffton, SC 29910
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/14/1997 Document number: P97000070629

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Mark Sygaj

2732 TRANSIT ROAD

WEST SENECA, FL 14224

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee

FL 32301

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 authorized by the board, or the corporation has been notified in writing of the change.

Laurie B. Johnson
Signature of an officer or director

Laurie B. Johnson

Printed or typed name and

Secretary

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.

Corporation Service Company

Emily Croft
Signature of Registered Agent

02/16/2018
Date

If signing on behalf of an entity:

Emily Croft

Asst. Vice President

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR25045 (03/12)