

P 98000030003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

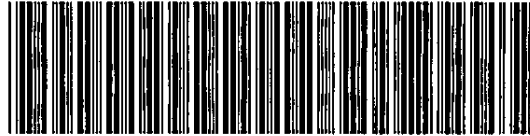
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200280086372

02/01/16--01005--023 **35.00

FILED STATE
SECRETARY OF CORPORATIONS
16 FEB -1 PM 8:50

FEB -2 2016

C McNAIR

COVER LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 FEB -1 4:18:59

TO: Amendment Section
Division of Corporations

SUBJECT: NURSING CONCEPTS, INC.

Name of Corporation

DOCUMENT NUMBER: P98000030003

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:

TAEHO OH

Name of Contact Person

NURSING CONCEPTS, INC.

Firm/Company

7511 NW 64TH STREET

Address

TAMARAC, FL 33321

City/State and Zip Code

taeho_oh@att.net

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

For further information concerning this matter, please call:

LORI KOBETZ

Name of Contact Person

at (954) 721-8220

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: NURSING CONCEPTS, INC.
2. The principal office address: 7511 NW 64TH STREET, TAMARAC, FL 33321

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 03/30/1998 Document number: P98000030003

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)

SHARON REYNOLDS, RESIGNED

7511 NW 64TH STREET

TAMARAC, FL 33321

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

TAEHO OH

7511 NW 64TH STREET

P.O. Box NOT acceptable

TAMARAC, FL 33321

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.

TaeHo Oh

Signature of an officer or director

TAEHO OH, PRESIDENT

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.

Sharon A Reynolds

Signature of Registered Agent

01/20/2016

Date

If signing on behalf of an entity:

SHARON REYNOLDS

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 FEB - 1 PM 8:56