

P98000042675

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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## KPPB LAW

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July 27, 2017

### **SENT VIA FEDERAL EXPRESS**

Florida Department of State  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RE: Scenic Health Alliance Inc. - Change of Registered Agent

Dear Sir or Madam:

Enclosed is a cover letter and a Statement of Change of Registered Office or Registered Agent or Both For Corporations for Scenic Health Alliance, Inc. along with check #3642 made payable to the Florida Department of State in the amount of \$122.50 to cover the cost of filing. Once the change has been filed, please send a copy of the filing in the enclosed self-addressed, stamped envelope provided for your convenience.

Should you have any questions or require any additional information, please do not hesitate to contact me.

Sincerely,



Tracee Batchelor  
Legal Assistant

Enclosures

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

1. The name of the corporation: SCENIC HEALTH ALLIANCE, INC
2. The principal office address: 4711 Scenic Highway, Pensacola, FL 32504
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 5/12/1998 Document number: P48000042675
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)

Charles P. McGrath

4711 Scenic Hwy

Pensacola, FL 32504

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

Blake Fenton

4711 Scenic Hwy

P.O. Box NOT acceptable

Pensacola, FL 32504

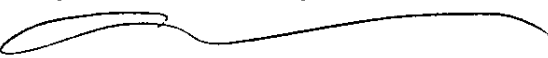
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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

  
\_\_\_\_\_  
Signature of an officer or director

Charles P McGrath, D.C.  
\_\_\_\_\_  
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

7/26/2017  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Blake Fenton  
\_\_\_\_\_  
Typed or Printed Name

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