## P98000078588

-	(Requestor's Name)	,	
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PICK-UF	WAIT	MAIL	
	(Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions	to Filing Officer:	İ	
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To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell tecora.bell@cscqlobal.com

Date: May 26, 2017

Order#: 635632/112

Re: INTERVENTIONAL REHABILITATION OF SOUTH FLORIDA, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Tecora Bell c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of cha	unge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of FL registered agent, or both, in the State of Florida.	
1. The name of	the corporation: INTERVENTIONA	AL REHABILITATION OF SOUTH FLORIDA, INC.	
	office address:	tation, FL 33322	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 09/11/1998	Document number: P98000078588	
	d street address of the current regis rtment of State: (If resigned, enter	tered agent and registered office on file with the resigned)	
	MARCUS JILLIAN		
	7700 WEST SUNRISE BLVD.		
	SUNRISE	FL 33322	
6. The name and (if changed):	I street address of the new register	ed agent (if changed) and /or registered office	71
	Corporation Service Company	711 ) 	
	1201 Hays Street		
	P.O. B	FL 32301	
	I diidiidSSEE	FL 32301	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registered agent	t,
Such change wa authorized by th	s authorized by resolution duly ac ne board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
$\sim$	in E agni	Jill Cilmi, Vice President	
7-	e of an officer or director	Printed or typed name and title	
perjormance oj agent. Or, if thi hereby confirm	the appointment as registered age to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not a Service Company	ent and agree to act in this capacity. ll statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I ified in writing of this change.	
-1.000	e Cokubi	05/24/2017	
_	nature of Registered Agent \	Date	
If signing on be	half of an entity:		
Grace E. Kirby,	Asst. Vice President		
T	yped or Printed Name		

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