## P98000087142

**CT** CORPORATION SYSTEM

CORPORATION(S) NAME		2001 HAY 2
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() Nonprofit		() Merger
() Foreign	() Dissolution/Withdrawal	() Mark
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() Limited Partnership	() Annual Report	C) Child
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() Certified Copy	() Fictitious Name () Photocopies	() UCC
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() Call When Ready	() Call If Problem	() After 4:30
(x) Walk In	() Will Wait	(x) Pick Up
() Mail Out	()	(1) 1102 Op
Name	5/21/01	Order#: 4413322
Availability		1 2000
Document	G. COULLIET TE WAY 2 1 2001	
Examiner		Ref#:
Updater		
Verifier W.P. Verifier	* ***	
w.P. Ventier	-	Amount: \$
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

## Florida Department of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0502, 60	7.1508, or 617.1508, Florida Statutes, the
undersigned corporation organized under the laws of the State submits the following statement in order to change its registered State of Florida.	d office or registered agent, or both, in the
1. The name of the corporation is: Tandem Health Care of Miami, I	nc.
2. The mailing address of the corporation is: 2040 Winter Springs	Blvd. Oviedo, FL. 32765
3. Date of incorporation/qualification: 10/12/1998	Document number: 198000 87142
4. The name and address of the current registered agent and offi	ce:
Tandem Health Care, Inc.	ALL SEC
2040 Winter Springs Blvd.	THAS
Oviedo, FL 32765	
5. The name and address of the new registered agent and office:	(P. O. Box Not Acceptable)
C T Corporation System	
c/o C T Corporation System, 1200 South Pine Island	Road S
Plantation, Florida 33324	
The street address of its registered office and the street address agent as changed will be identical.	ess of the business office of its registered
Such change was authorized by resolution duly adopted by is authorized by the board.	ts board of directors or by an officer so
James The	5/15/01 (Date)
(Signature of an officer, chairman or vice chairman of the boa	
Lawrence k. Deering, Chairman and CEO /	5/15/01 (Date)
(Printed or typed name and title)  Having been named as registered agent and to accept servi corporation, I hereby accept the appointment as registered I further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and accept	ce of process for the above stated agent and agree to act in this capacity. relative to the proper and complete
registered agent.	5/18/01
(Signature of Registered Agent)	(bate)
If signing on behalf of an entity: Mary Lou Mulkeen	
Assistant Secretary  (Typed or Printed Name)	(Capacity)
	FILING FEE: \$35.00
CR2E045(4/95)	