Public Access System Katherine Harris, Secretary of State

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(((H010000680313)))

To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : STRAWN & MONAGHAN, P.A.

Account Number : 076215000176 Phone : (561)278-9400

Fax Number (561)278-9462

REGISTERED AGENT CHANGE

H.S. OF PALM BEACH, INC.

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1 decorporation organized under the laws of the State of $_{ m Flor1da}$	·
	owing statement in order to change its registered office or regist	
	the corporation: H.S. of Palm Beach, Inc.	
2. The mailing	address of the corporation: 712 U.S. Highway One,	
<u> </u>	alm Beach, FL 33408	
3. Date of inco	proporation/qualification; 03/01/1999 Document number	er: P99000020104
4. The name an	d address of the current registered agent and office:	
	Fred C. Cohen	_
	712 U.S. Righway One	T SO O
	North Palm Beach, FL 33408	
5. The name an	d address of the new registered agent (if changed) and/or registere	d office (if changee)
	(P. O. Box Not Acceptable)  Jeffrey L. Cohen	22 388 888
•		- <u>Fig</u> 3
•	Delray Beach, FL 33483	- ST
The street add-		DRATE.
agent, as chang	ess of its registered office and the street address of the business of the bus	_
Such charge was authorized by the	as authorized by resolution duly adopted by its board of directors he board.	or by an officer so
114	In Eline	(Date)
_	· · · · · · · · · · · · · · · · · · ·	(Date)
Stephen E.	(Printed or typed name and title)	
Having been no corporation, I h I firther agree performance of registered agen	amed as registered agent and to accept service of process for the hereby accept the appointment as registered agent and agree to to to comply with the provisions of all statutes relative to the prop my duties, and I am familiar with and accept the obligation of n	above stated act in this capacity. or and complete ny position as
	5-22	ð í
Jeffrey L.	Signatury of Registered Agent) (Date)  Soften  If of an entity:	
C	Typed or Printed Name) (Capacity	)
	* * * FILING FEE: \$35.00 * * *	
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