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Certified Copies	_ Certificates	s of Status
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Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: February 8, 2021

Order#: 639480/185

Re: HI-TECH CARE, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX _ Check in the amount of \$5.00.

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:Meghan Groom c/o Corporation Service Company 251 Little Falls Drive 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	nge is submitted for a corporation orgo	02, 607,1508, or 617,1508, Florida Statutes, this mized under the laws of the State of FL stered agent, or both, in the State of Florida.		
	he corporation: HI-TECH CARE, INC.			
	office address: Way Suite A BATON ROUGE, LA 70			
3. The mailing a	ddress (if different):			
4. Date of incorp	oration/qualification: 06/28/1999	Document number: P99000058510		
	street address of the current registered iment of State: (If resigned, enter resign	agent and registered office on file with the ned)		
	CT CORPORATION SYSTEM	2021 SEC TA		
	1200 SOUTH PINE ISLAND ROAD	TALLAHAS		
	12,111,11,011,12,0002			
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office 99			
	Corporation Service Company			
	1201 Hays Street			
		ox NOT acceptable		
	Tallahassee	FL 32301		
as changed will	be identicबी.	t address of the business office of its registered agent,		
Such change wa authorized by th	s authorized by resolution duly adopte e board, or the corporation has been n	ed by its board of directors or by an officer so otified in writing of the change.		
Xial & Const.		Jill Cilmi, Vice President		
I fuither agree to of my duties, and document is being corporation has	been notified in writing of this chang	tutes relative to the proper and complete performance ligation of my position as registered agent. Or, if this he registered office address, I hereby confirm that the		
By: I) N	Service Company	02/04/2021 Date		
If signing on bel	nalf of an entity:			
·	Asst. Vice President ped or Printed Name	NN 227 00 / / /		
	* * * FILING F	EE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)