DOCUMENT# P12000010422

Entity Name: ADELCARE II, INC

## Current Principal Place of Business:

3206 CONWAY RD STE 5 ORLANDO, FL 32812-7316

## **Current Mailing Address:**

3206 CONWAY RD STE 5 ORLANDO, FL 32812-7316 US

## FEI Number: 45-4409961

## Name and Address of Current Registered Agent:

MAEZTU II, VICTOR M 504 MOROCCO AVE ORLANDO, FL 32807 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: VICTOR M MAEZTU II				03/27/2016
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT, DIRECTOR	Title	VP, FINANCIAL DIRECTOR	
Name	MAEZTU, JEANNETTE	Name	MAEZTU II, VICTOR M	
Address	504 MOROCCO AVE	Address	504 MOROCCO AVE	
City-State-Zip:	ORLANDO FL 32807	City-State-Zip:	ORLANDO FL 32807	
Title	ASSISTANT DIRECTOR			
Name	NAVARRO, ILEANA			
Address	523 SOUTHERN CHARM DR			
City-State-Zip:	ORLANDO FL 32807-5074			

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VICTOR M MAEZTU II

VP, FINANCIAL DIRECTOR 03/27/2016

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

Date