

# L15000192817

2018-11-26 15:35:10 CST

15642080845 From: Ranae McGraw

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H180003362933))



H180003362933ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: \_\_\_\_\_

FILED  
18 NOV 26 AM 8:52  
STATE OF FLORIDA  
TALLAHASSEE

LLC REGISTERED AGENT CHANGE  
PATH MEDICAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

AL

2018 NOV 26 PM 4:54

Electronic Filing Menu

Corporate Filing Menu

Help

### STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: PATH MEDICAL, LLC

2. (a) Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
2304 W OAKLAND PARK BLVD  
FT LAUDERDALE, FL 33311

(b) Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
2304 W OAKLAND PARK BLVD  
FT. LAUDERDALE, FL 33311

3. Date of filing/registration in Florida  
11/13/2015

4. Document number  
L15000192817

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
PERMAUL, RUSSELL

Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)  
6220 S ORANGE BLOSSOM TRAIL SUITE 200  
ORLANDO, FL 32809

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
C T Corporation System  
NEW Registered Office Address:  
1200 South Pine Island Road  
Plantation, FL 33324

FILED  
18 NOV 26 AM 8:52  
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Denise L. Atter  
Signature of a member or authorized representative of a member  
Denise L. Atter  
Printed or typed name of signor

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: Danny Verdecchia  
Signature of Registered Agent  
Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00