

LD1000022618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

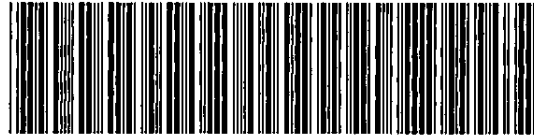
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

DB

Office Use Only



500102324815

05/23/07--01027--015 **25.00

FILED
07 MAY 23 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DUNSFORD & ASSOCIATES

ATTORNEYS AT LAW

Tina E. Dunsford *
Jay Sharp **
Diana Graldo***

May 16, 2007

Secretary of State of Florida
Division of Corporations
Corporate Filings
PO Box 6327
Tallahassee, FL 32314

FILED
07 MAY 23 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: J.H. Cho, M.D., L.L.C.

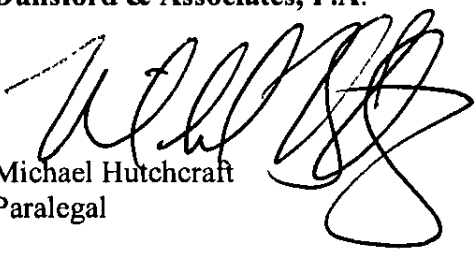
Dear Madam or Sir:

Enclosed please find an original and a copy of Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company for the above-referenced LLC. I have also enclosed our check for \$25.00 to cover the filing fee. Please file at your earliest convenience and return the "copy" stamped copy to me in the enclosed self-addressed stamped envelope.

Thank you for your attention to this matter. As always, please feel free to contact me should you have any questions, comments or concerns.

Sincerely,

Dunsford & Associates, P.A.


Michael Hutchcraft
Paralegal

Encls.

DUNSFORD & ASSOCIATES

201 S. Westland Avenue • Tampa, FL 33606
Telephone: 813-254-6300 • Fax: 813-254-6344

www.dunsfordlaw.com

* Admitted in FL and GA
** Admitted in LA
*** Paralegal

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: J.H. Cho, MD, LLC
2. The mailing address of the limited liability company is : 14451 Bruce B. Downs Blvd., Tampa, FL 33613

12/27/2001

L01000022618

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Frank J. Rief, III, Esq.

Name

442 W. Kennedy Blvd., Suite 340

Address

Tampa, FL 33613

City, State and Zip

6. The name and address of the new registered agent and/or office:

Tina Dunsford, Esq.

Name

609 W. Azeele Street

Florida street address (P.O. Box NOT acceptable)

Tampa

FL 33606

City, State and Zip

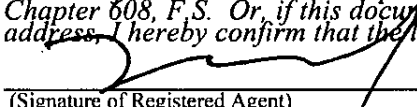
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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.


(Signature of a member or authorized representative of a member)

J. H. Cho, MD

(Printed or typed name of signee)

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 608, 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.


(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

FILED
07 MAY 23 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA