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

tmall	Adoress:					
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## LLC REGISTERED AGENT CHANGE AMERICAN FAMILY MEDIA, LLC

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## 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, Fiorida 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.

Na	me of the limited liability company: American Family Med	ın, l	۱.۱.۱				
2. (a)	7500 W 110th Street			7500 W 110th Street			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	5th Floor, Suite 500			5th Floor, Suite 500			
	Overland Park, KS 66210			Overland Park, KS 66210			
	03/31/2014		ξ,	-e VII-40000024-46			
	Date of filing/registration in Florida 4.			Document number			
. (a)	NRAI SERVICES, INC						
(44)	Registered Agent and Registered Office shown on the records of the Fl	orio	da i	Dept. of State:			
	1200 SOUTH PINE ISLAND ROAD						
	Registered Office Address	1:5	<u></u>				
				ESS 78			
	PLANTATION 3332	4		<b>一</b>			
	PLANTATION ,FL 3332						
7L-3				TED TED			
(0)	Enter name of NEW Registered Agent and/or NEW Registered Offic	e a	d d)	FILED  AR 18 M 10: 31  AND STATE  AND STATE			
	C T Corporation System						
	NEW Registered Office Address:						
	1200 South Pine Island Road						
	Plantation Ft. 3332			24			
e char ent we e artic	mited liability company is not organized under the laws of nge or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liability re authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the limit when the organization of the operating agreement of the limit was of a member of althoused representative of a member of a population of the appointment as registered agent and agree to	y c lined	ist on mit lic nes	ered office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in ability company.  M. Halpin  Printed or typed name of signee			
ovișie e obli mere	sy accept the appointment as registered agent and agree to ons of all statutes relative to the proper and complete perfo igations of my position as registered agent as provided for ily reflect a change in the registered office address. I herel I'm writing of this change.	in In	n I Ci	n ans capacity. In their agree to comply with the nee of my duties, and I am familiar with and accep hapter 605, F.S. Or, if this document is being filed aftern that the limited liability company has been			