

L17000060098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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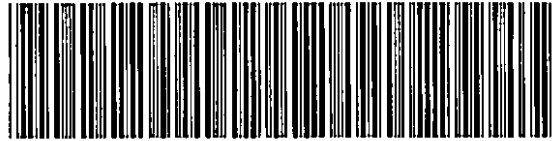
(Business Entity Name)

(Document Number)

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S. PRATHER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LUXEPODIATRY PALM BEACH PLLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SUZANNE FUCHS  
Name of Person

LUXEPODIATRY PALM BEACH PLLC  
Firm/Company

11000 prosperity Farms Rd #102  
Address

Palm Beach Gardens, FL 33410  
City/State and Zip Code

Dr Fuchs@ Luxe podiatry . com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUZANNE FUCHS at ( 347 ) 405-2301  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: LUXE PODIATRY PALM BEACH PLLC
2. (a) 11000 Prosperity Farms Rd #102 (b) 11000 Prosperity Farms Rd #102  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)  
Palm Beach Gardens, FL 33410 Palm Beach Gardens, FL 334
3. 03/16/2017 4. 417000060098  
Date of filing/registration in Florida Document number
5. (a) United Corporate Services, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

9200 South Dadeland Blvd STE 508  
Miami FL 33156

(b) Suzanne Fuchs

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

11000 Prosperity Farms Road #102  
**NEW Registered Office Address:**

Palm Beach Gardens FL 33410

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]  
Signature of a member or authorized representative of a member

Suzanne Fuchs  
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 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.

[Signature]  
Signature of Registered Agent

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