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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.					
SIGNATURE: BRIAN KRUPPA	SECRETARY	08/29/2023			

SIGNATURE: BRIAN KRUPPA

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L08000089490

Entity Name: CENTRAL FLORIDA REALTY MEDICS LLC

Current Principal Place of Business:

10027 UNIVERSITY BLVD ORLANDO, FL 32817

Current Mailing Address:

5401 N CENTRAL EXPY, SUITE 300 DALLAS, TX 75205 US

FEI Number: 26-3389523

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	E LISA DUBOIS			08/29/2023	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGR	Title	MRG		
Name	WECLEW, VICTOR T	Name	SENCENBAUGH, BEN		
Address	10027 UNIVERSITY BLVD	Address	10027 UNIVERSITY BLVD		
City-State-Zip:	ORLANDO FL 32817	City-State-Zip:	ORLANDO FL 32817		
Title	SECRETARY	Title	TREASURER		
Name	KRUPPA, BRIAN	Name	MALDONADO, JOSE B.		
Address	5401 N CENTRAL EXPY, SUITE 300	Address	5401 N CENTRAL EXPY, SUITE	E 300	
City-State-Zip:	DALLAS TX 75205	City-State-Zip:	DALLAS TX 75205		

Certificate of Status Desired: No

FILED Aug 29, 2023 Secretary of State 4694417446CC

Date