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To:	Division of Corporations		
	Fax Number : (850)617-	6380	
From:	Account Name : UNITED CO Account Number : I20140000 Phone : (914)949- Fax Number : (914)949-	9188	ed for future
ann	the email address for this b nual report mailings. Enter o ail Address: <u>JDEY, Kel</u>	only one email address p	lease.**
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Electronic Filing Menu Corporate Filing Menu

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Oct. 14. 2022 6:54AM

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name of the corporation: <u>MEDICAL LOGIC FT. WALTON, INC.</u>

2. The principal office address: 220 W GERMANTOWN PK #250 PLYMOUTH MEETING PA 19462

3. The mailing	ddress (if different):					
4. Date of incorporation/qualification: 10/9/2012		Document number: F12000004125				
	d street address of the current registered a truent of State: (If resigned, enter resign		h the			
	Joseph P Russell			20		
	3325 Bartlett Blvd			2022 OCT 14	<b>-</b> - <b>-</b> - <b>-</b> - <b>-</b> - <b>-</b> - <b>-</b>	
	Orlando, FL 32811		<u></u> 24 -	14	ب محد ہ	
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered offic			AM 9:	T	
	United Corporate Services, Inc.		1 <u></u> ,	မာ		
	3458 Lakeshore Drive					
	P.O. Box NOT acceptable					
	Tallahassee, FL 32312					
The street addr as changed wil	ess of its registered office and the street be identical.	address of the business office of its	registere	d agent,		
Such change w authorized by t	as authorized by resolution duly adopte he board, or the corporation has been n	d by its board of directors or by an optified in writing of the change.	officer so			
/s/Diane Siegel		Diane Siegel Sr. Director			••	
Signature of an officer or director		Printed or typed name and titl	e			
I further agree of my duties, an document is be	the appointment as registered agent at to comply with the provisions of all sta ad I am familiar with and accept the ob ing filed merely to reflect a change in the s been notified in writing of this change	tutes relative to the proper and com ligation of my position as registered be registered office address. I hereb	plete perfe agent. O y confirm	ormance r, if this that the	•.	
/s/Michael A. Barr		10/13/2022			•	
Signature of Registered Agent		Date			•	

If signing on behalf of an entity:

United Corporate Services, Inc.

Typed or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)