

F1200000414

(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:

Office Use Only



000272967300

RECEIVED
DEPARTMENT OF REVENUE
15 MAY 21 PM 12:33
TO: ACCOUNTS RECEIVABLE
SUFFICIENT OFFICE

RECEIVED
15 MAY 21 12:34
TO: ACCOUNTS RECEIVABLE
TALLAHASSEE, FLORIDA

RAC

MAY 22 2015

R. WHITE

FLORIDA FILING & SEARCH SERVICES, INC.

**P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 05-21-15

NAME: MDLIVE, INC

TYPE OF FILING: REGISTERED AGENT CHANGE

COST: 35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Attache

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Delaware
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MDLIVE, INC.
2. The principal office address: _____
13630 NW 8TH ST, SUITE 205 SUNRISE FL 33325
3. The mailing address (if different): _____
13630 NW 8TH ST, SUITE 205 SUNRISE FL 33325
4. Date of incorporation/qualification: October 10, 2012 Document number: F12000004147
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)

F&L CORP

ONE INDEPENDENT DR, SUITE 1300

JACKSONVILLE, FL 32202

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

National Corporate Research, Ltd., Inc.

155 Office Plaza Drive

P.O. Box NOT acceptable

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

RANDY PARKER, President and CEO
Printed or typed name and title

*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 obligation of my position as registered
agent. Or, if this document is being filed merely to reflect a change in the registered office address, I
hereby confirm that the corporation has been notified in writing of this change.*

[Signature]
Signature of Registered Agent

5/21/2015
Date

If signing on behalf of an entity:

SEAN HONAN, ASSISTANT SECRETARY

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 (03/12)