

F14000001937

**Florida Department of State
Division of Corporations
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Division of Corporations
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From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
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Email Address: Karenhurley@hpmis.com

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE
HURLEY PRACTICE MANAGEMENT SERVICES, INC.**

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Electronic Filing Menu

Corporate Filing Menu

Help

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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 Maryland in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Hurley Practice Management Services, Inc.
2. The principal office address: 7738 110th Ave E, Parrish, Florida 34219
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/2/2014 Document number: F14000001937
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)
BUSINESS FILINGS INCORPORATED
1200 South Pine Island Road
Plantation, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Karen Hurley
7738 110th Ave E
P.O. Box NOT acceptable
Parrish, Florida 34219

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.

Karen Hurley
 Signature of an officer or director

Karen Hurley, President
 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.

Karen Hurley
 Signature of Registered Agent

03/03/2016
 Date

If signing on behalf of an entity _____

 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)

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 DIVISION OF CORPORATIONS
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