## F20000005168

(Requestor's Name)			
(Address)			
(Address)			
(Madicas)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(333,000 2,00)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

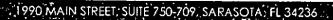
Office Use Only



800372298558

08/31/21 - 01003 - 001 \*\*3760.00

## UNISEARCH, INC.





SECRETARY OF STATE OF FLORIDA **DIVISION OF CORPORATIONS** THE CENTRE OF TALLAHASSEE 2415 NORTH MONROE **SUITE 810** TALLHASSEE, FL 32303

**RE: Unisearch Change of Address** 

To Whom it May Concern:

Enclosed please find the applications to change the registered agent address on behalf of Unisearch, Inc. for entities that have appointed Unisearch as agent. (More applications will be forwarded in a separate package for the remaining entities). Also enclosed is check # 1043 for \$3,760. Should you have any questions, please contact me at the below number.

Thank you,

oelle Churik

Unisearch, Inc.

1990 Main Street, Suite 750-709

Sarasota, FL 34236

888-617-4478

joelle.churik@unisearch.com

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida and englishments for a corporation organized under the laws of the State of the state of the change its registered office or registered agent, or both, in the State of E	WASHINGTON
1. The name of t	the corporation: SEATTLE CANCER CARE ALLIANCE CORPORATION	
	l office address: 2414 SE 125TH AVE.VANCOUVER, WA 98683	
3. The mailing a	address (if different):	
4. Date of incorp	rporation/qualification: 11/17/2020 Document number: F2000000	05168
	d street address of the current registered agent and registered office on file wartment of State: (If resigned, enter resigned)	ith the
	UNISEARCH, INC.	_
	155 OFFICE PLAZA DRIVE	
	TALLAHASSEE, FL 32301	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	- fice
	UNISEARCH, INC.	_
	1990 MAIN STREET, SUITE 750-709	
	P.O. Box NOT acceptable	_
	SARASOTA, FL 34236	- s <b>2</b>
The street addre as changed will	ess of its registered office and the street address of the business office of it I be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an he board, or the corporation has been notified in writing of the change.	officerso 25 AH
	ure of an officer or director Printed or typed name and to	
l further agree t of my duties, and document is bei	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and con nd I am familiar with and accept the obligation of my position as registere ing filed merely to reflect a change in the registered office address, I herel s been notified in writing of this change.	npleterperformance d agent. Or, if this by confirm that the
A.	Phle (hull 08/17/2021	
( )	gnature of Registered Agent Date chalf of an entity:	
	JK, ASST. SECRETARY	
	Typed or Printed Name	

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