

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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NEW FILINGS	<u>AMENDMENTS</u>	
Profit	Amendment	
☐ Not for Profit☐ Limited Liability	Resignation of R.A., Officer/Director Change of Registered Agent	
Domestication	Dissolution/Withdrawal Nar	7
☐ Other	☐ Merger Ava	lebih 7-1
OTHER FILINGS	REGISTRATION/QUALIFICATION	ייייייייייייייייייייייייייייייייייייי
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Annual Report	☐ Foreign	
☐ Fictitious Name	Limited Partnership Reinstatement	C. C.
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: Precision Health Services 1		
2. The mailing address of the limited liability company is:		
6506 Spyglass Lane, Bradenton, FL 34202.		
March 24, 2000 3. Date of filing/registration in Florida L0000003664 4. Document number		
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:		
Chery Lynn Davis Name 6506 Spyglass Lane Address Bradenton FL 34202 City, State and Zip		
6. The name and address of the new registered agent and/or office:		
City, State and Zip Coldsmith and Growt, P.A. Name Also Park Avenue North, Suite 100 25 Florida street address (P.O. Box NOT acceptable) City, State and Zip		
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)		
Daniel R. Davis (Printed or typed name of signee)		
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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. (Signature of Registered Agent)		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314