

L04000075024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

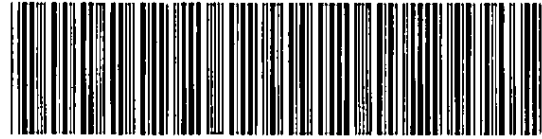
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TALLAHASSEE

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**CT CORP**  
**(850) 656-4724**  
**3558 lakesore Drive**  
**Tallahassee, FL 32312**

**Date:** 08/15/2023  
Acc#I20160000072

*en: c DW*

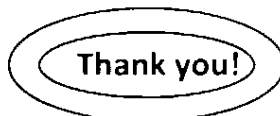
Name:	I Pathology, LLC
Document #:	
Order #:	15081898 - 1

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>	Email Address for Annual Report Notifications: <div></div>
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Amount: \$ **55.00**



**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Name of the limited liability company: I PATHOLOGY, LLC
2. (a) 2300 N HASKELL AVE  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
DALLAS, TX 75204  
10/15/2004
- (b) 2300 N HASKELL AVE  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
DALLAS, TX 75204  
L04000075024
3. 10/15/2004 Date of filing/registration in Florida
4. L04000075024 Document number
5. (a) RUFFIER, JOHN D  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
215 N EOLA DR  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
ORLANDO, FL 2801
- (b) C T Corporation System  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
1200 South Pine Island Road  
**NEW Registered Office Address**:  
Plantation, FL 33324

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]  
Signature of a member or authorized representative of a member

Matthew I. Zucker, Authorized Person  
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 605, 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.*

Meredith Hellwig Meredith Hellwig, Assistant Secretary  
Signature of Registered Agent