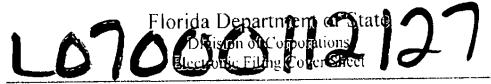
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 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.

a)	me of the limited liability company: Anderson and M			Mailing address of limite			
u.	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		, 	Mailing address of limite (Note: MAY BE POS	d liability co TOPFICE I	mpany: 3 <i>OX</i>)	
	3150 South Conway Road		Will Pe	eeples			
	Orlando, FL 32812	_	33 11:	h Ave South, # 520, Na	shville, TN	37203	 -
	11/05/2007		L07000	112127			
	Date of filing/registration in Florida	- 4.		Document number			
	• -						
(a)	Registered Agent and Registered Office shown on the records o	i the Florid	ls Dept. of	State:			
	Jeffrey M. Koltun		•				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES					
	150 Spartan Drive, Suite 100		<u></u>				
			. —			2(
	Maitland, F	ኒ32751				122	
					15 1	2022 JUN	
(b)	Enter name of NEW Registered Agent and/or NEW Registere		_			<u>ا</u> د	
(~)	Enter name of NEW Registered Agent and/or NEW Registers	ed Office a	ddress:			ω	1
						A	Ċ
	CT Corporation System			.		⋮	
	NEW Registered Office Address:				:	ယ	
	1200 South Pine Island Road					œ	
	Plantation, I	33324					
ie	limited liability company is not organized under the l	aws of th	ne State o	f Florida, it is hereby co	onfirmed I	hat afte	er the
ing	e or changes are made, the Florida street address of the	nc regisio Tiskilito	romnany	it is hereby confirmed	that the ch	ange(s	;)
∽ /	tore authorized by an athronapyc Voic DL Hic Hichiock	3 OL 1114 1	THILL COL 1-41	Ditter, Commission	herwise pr	ovided	in
ar	ticles of organization or the operating agreement of the	ie limite	Hability	company.			
	Aun	-		Anzir Moopen, D.M.D., Printed or typed name			
sign	anne of a member or authorized representative of a member					امند ا	
ier ovi.	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple oligations of my position as registered agent as provide rely reflect a change in the registered office address, add in vigiting of this change.	gree to d te perfor ded for in	ct in this mance of Chapter confirm	capacity. I further agr my duties, and I am fai 605, F.S. Or, if this di that the limited liability	ree to comp milior with ocument is r company	ny win and a being has bei	i ine ccept filed en