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PICK-UP WAIT MAIL								
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ALLAHASSEE, EI STATE

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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscqlobal.com

Date: January 26, 2017

Order#: 463320/270

Re: LAKEWOOD RANCH MEDICAL GROUP, L.L.C.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Grace Kirby

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.	Na	me of the limited liability company: LAKEWOOD RA	NCH M	ΙΕΙ	DICAL G	ROUP, L	L.C.		
2 ((a)	8330 Lakewood Ranch Boulevard	(H)	367 S. Gulph Road				
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0	') -		Mailing ad			lity company: FICE BOX)
			_	_	UHS of Delaware, Inc.				
		Bradenton FL 34202	-	-	King of F	Prussia	PA	194	106
		01/23/2008			L08000008612				
3.		Date of filing/registration in Florida	4.			Docume	ent numbe	r	
5.	(a)	C T Corporation System				_			
	` '	Registered Agent and Registered Office shown on the records of the	e Florida	a D	ept. of Star	te:			
		1200 South Pine Island Road				_			
		Registered Office Address (MUST BE FLORIDA STREET A	<u>DDRESS</u>	<u>s)</u>		_			
						_			
		Plantation , FL_	33324	1		_			
((b)	Corporation Service Company					SEC TALL	2017	
		Enter name of NEW Registered Agent and/or NEW Registered (Office ad	dro	: <u>ss</u> :	_	AH/	JAN	П
							ASS.	¥ 30	CONTRACTOR OF THE PERSON NAMED IN COLUMN 1
		1201 Hays Street				_			m
		<u>NEW</u> Registered Office Address:					E.S.	U	[]
						_	E. FLORIDA	k: 0 :h	
		Tallahassee , FL	32301	i _					
the ages was the Si I he protected to n	chant vilve arti	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable readthorized by an affirmative vote of the members of cles of organization or the operating agreement of the law or a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	the regis bility co the lim imited l	ste om nite lia Cil	ered offic pany, it i ed liabilit bility cor mi, Autho	e and the is hereby ty company npany. prized Pe Printed o	business confirmed by or as of son reson	office of that the office of sign	of the registered he change(s) he provided in
	Y	race to Kuby	BY: G	ìra	ce E. Ki	rby, Ass	t. Vice Pi	resider	nt