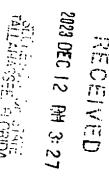
din.					
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 170093 8183052 AUTHORIZATION : COST LIMIT : \$\_ ORDER DATE: December 5, 2023 ORDER TIME : 2:40 PM ORDER NO. : 170093-009 CUSTOMER NO: 8183052 CHANGE OF AGENT NAME: ALAN B PATTERSON MD, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

## 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	ame of the limited liability company:  ALAN B. PATTE	ERSON	I, M.D., LL	C
2. (a)	7451 WILES ROAD, SUITE 205		(b) 4010 \	V. Boy Scout Blvd, Suite 500
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(*)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	CORAL SPRINGS, FL 33067	_	Tampa	, FL 33607
3.	01/12/2009  Date of filing/registration in Florida	 _ 4.	L090000	003366  Document number
	Date of Hing registration in Fronta	7.		Bocancia namoci
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State  UPM Service Corp  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			State:
	1501 YAMATO ROAD SUITE 200 W			
	BOCA RATON FL	33431		
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company			- 12 F:
	NEW Registered Office Address:			57
	1201 Hays Street			<u> </u>
	Tallahassee FL	32301		
hange gent v vas/we he arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe ability of the li limited	red office company, i mited liabi liability c	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in
	ure of a member or authorized representative of a member		,	Printed or typed name of signee
rovisio he obli o mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.  Grace F. Kirby, Asst. Vice President	perforn I for in iereby o	nance of m	v duties, and I am familiar with and accept-
	Grace E. Kirby, Asst. Vice Presi	ident		

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00