

L09000075830

To: Page 2 of 3

2018-02-05 09:57:03 CST

12122023379 From: Kimberly Laughrey

2/5/2018

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000042103 3)))



H180000421033ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT CHANGE
PASTEUR MEDICAL HOLDINGS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

RECEIVED

FEB 05 2018

Electronic Filing Menu

Corporate Filing Menu

Help

S. WARREN

FEB 06 2018

FILED
18 FEB -5 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: PASTEUR MEDICAL HOLDINGS, LLC
2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
4578 WEST 12TH AVENUE
HIALEAH, FL 33012
- (b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
1250 MARY ST SUITE 400
COCOA RIT GROVE, FL 33133
3. 08/06/2009 Date of filing/registration in Florida
4. L09000075830 Document number

5. (a) Relevant K-1s
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
333 SE 2ND AVENUE #4500

Main FL 33131

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

C T Corporation System

NEW Registered Office Address:

1200 South Pine Island Road

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.

Catherine I Kelaghan
Signature of a member or authorized representative of a member

Catherine I Kelaghan
Printed or typed name of signer

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.

By: C T Corporation System
Signature of Registered Agent

Jan M. DeJ James M. DeJ
Assistant Secretary

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

INHS13 (2/14)

FILED
18 FEB -5 AM 10:58
TALLAHASSEE, FLORIDA
SECRETARY OF STATE