L09000089799

Division of Corporation ((H13000194109 3)) Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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H13000194109
(((H13000194109 3)))

H13000194109ABX

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

From:
Account Name : CARLTON FIELDS
Account Number : 076077000355
Phone : (813)223-7000
Fax Number : (813)229-4133

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

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LLC REGISTERED AGENT CHANGE
TEMPLE TERRACE MEDICAL DIRECTOR, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

(((H13000194109 3)))

SEP 10 2013
T. HAMPTON

****
*** TX REPORT ***
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Division of Corporations

(((H13000194109 3)))

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Division of Corporations
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H13000194109 3AB

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Certified Copy	0

(((H13000194109 3)))

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

Pursuant to the provisions of sections 608.416 or 608.508, 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: TEMPLE TERRACE MEDICAL DIRECTOR, LLC

2. (a) Principal office address of limited liability company: 13660 N. Dale Mabry Hwy
TAMPA, FL 33618
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 409 Bayshore Blvd.
TAMPA, FL 33606
(Note: MAY BE POST OFFICE BOX)

09/16/2009 — 3. Date of filing/registration in Florida

L09000085799 — 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: BACHMAN, RADHA V, Esq.

Registered Office Address: BUCHANAN INGERSOLL & ROONEY PC
401 EAST JACKSON STREET, SUITE 2500
TAMPA, FL 33602

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

NEW Registered Agent: CFRA, LLC

NEW Registered Office Address: 100 S ASHLEY DR
(MUST BE FLORIDA STREET ADDRESS) SUITE 400
TAMPA, FL 33602

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 of member or authorized representative of a member

Samuel S. Weinstein MD
Printed or typed name of signee

FILED
2013 JUL 30 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 608, 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.

Signature of Registered Agent

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

LNHS18 (05/08)

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