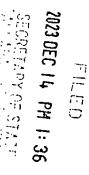
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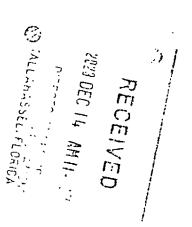
(Requestor's Name)						
(Address)						
(Address)						
						
1	(City/State/Zip/Phone #)					
PICK-UP	WAIT MAIL					
I	(Business Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions to Filling Officer:						
	of the same of the					
	Liu i u zuzi					

Office Use Only



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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.

1.	Na	ame of the limited liability company: FEMCHOICE OF	3 GYN I	LL	С		
2	(a)	7150 WEST 20 AVENUE SUITE 202		b)	4010 W. Boy Scout Blvd, Suite 500,		
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (<i>.</i>		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		HIALEAH, FL 33016	_	_	Tampa, Fl	_ 33607	
			_	_			
		03/01/2010		L	10000022	931	
3.		Date of filing/registration in Florida	4.]	Document number	
5.	(a)						
	, ,	Registered Agent and Registered Office shown on the records of t UPM Service Corp	he Florid	аΕ	Pept, of State		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			· · · ·	.:s	
		1501 YAMATO ROAD SUITE 200 W				is or	
		BOCA RATON, FL, FL	33431			PILED 2023 DEC 14 PM 1: 36 SECRETARY OF STATE	
	(b)					- R - R	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :							
	Corporation Service Company					<u> </u>	
	NEW Registered Office Address:						
		1201 Hays Street					
		Tallahassee FL_	32301	_			
ch ag wa	ange ent v is/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liad are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	registere bility co f the lim	ed om rite	office and pany, it is ed tiability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
		s/ Jill Cilmi	Jill	Cil		ized Person	
	_	airc of a member or authorized representative of a member				Printed or typed name of signee	
pro the to	oviși e obli mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p 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.	ee to act perform for in C ereby co	t in an Chi onj	this capa ce of my d apter 605, firm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed a limited liability company has been	
Si	<u>X)</u> gnatui	Grace E. Kirby, Asst. Vice re of Registered Agent	Preside	nŧ			