	Requestor's Name)					
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PICK-UP	WAIT	MAIL				
	(Business Entity Name)					
	Document Number)					
Certified Copies	_ Certificates of	Status				
Special Instructions to	Filing Officer:					
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(3)

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 170093

AUTHORIZATION : (

COST LIMIT : \$ 25.0

ORDER DATE: December 5, 2023

ORDER TIME : 9:29 AM

ORDER NO. : 170093-184

CUSTOMER NO: 8183052

CHANGE OF AGENT

NAME: SW FLORIDA WOMEN'S GROUP, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

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.

Name of the limited liability company: SW FLORIDA WOMEN'S GROUP, LLC							
2.	(a)	1890 SOUTHWEST HEALTH PARKWAY SUITE 303	(b)	4010 W.	Boy Scout Blvd, Suite 500	
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (U)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		NAPLES, FL 34109			Tampa, F		
			_	-		<u> </u>	
			-	-			
		03/29/2010		_	_10000034		
3.		Date of filing/registration in Florida	4.			Document number	
5.	(a)					_	
		Registered Agent and Registered Office shown on the records of the UPM Service Corp	e Florid	la D	Pept, of State	:	
		Registered Office Address (MUST BE FLORIDA STREET AL	DRES.	S)		-	
		1501 YAMATO ROAD SUITE 200 W					
		BOCA RATON, FL 33431					
		FL_				23	
1	(b)						
,	,υ)	Enter name of NEW Registered Agent and/or NEW Registered O	ffice ac	ldr	ess:		
		Corporation Service Company				, "", "", "", "", "", "", "", "", "", "	
		NEW Registered Office Address;					
		1201 Hays Street				್ತು	
		Tallahassee FL 3	2301				
chai agei was	nge nt w /we:	mited liability company is not organized under the laws or changes are made, the Florida street address of the resill be identical. Or, in the case of a Florida limited liabing authorized by an affirmative vote of the members of the of organization or the operating agreement of the limited liabing agreement of the limited street.	gistere lity co the lim	ed inp iite	office and pany, it is a diability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
		/s/ Jill Cilmi	Jill (Cili	mi, Author	rized Person	
		ure of a member or authorized representative of a member				Printed or typed name of signee	
prov the o to m	usic oblig iere:	y accept the appointment as registered agent and agree ms of all statutes relative to the proper and complete pe gations of my position as registered agent as provided f ly reflect a change in the registered office address. I her In writing of this change.	to act rforma or in C reby ca	in anc ha onf	this capa ce of my d upter 605, irm 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 be limited liability company has been	
L)	M	Grace E. Kirby, Asst. Vice Pre	esiden	t			