LIBOODE

34255

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PICK-UP WAIT MAIL							
(Business Entity Name)							
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DIVISION OF CORPCRATION 2023 DEC 14 PM 12: 40





CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 170093 8183052

AUTHORIZATION : 1 2 2 22 A

COST LIMIT : \$ 25.00

ORDER DATE: December 5, 2023

ORDER TIME : 9:39 AM

ORDER NO. : 170093-098

CUSTOMER NO: 8183052

CHANGE OF AGENT

NAME: JONATHAN RALPH 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.

2. (a) Principal office address of limited liability company: (Note: MUST RESTREET ADDRESS) Mailing address of limited liability company: (Note: MIST RESTREET ADDRESS) Tampa, FL 33607	l. Na	une of the limited liability company: JONATHAN RAI	LPH MD	, LLC			
Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) Boca Raton, FL 33431 Date of filing/registration in Florida Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: UPM Service Corp Registered Office Address ISON YAMATO ROAD SUITE 200 W BOCA RATON FL 33431 BOCA RATON FL 33431 Finter name of NEW Registered Agent and/or NEW Registered Office address: 1201 Hays Street Tallahassee FL 32301 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 or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signec		· · · —	(h	4010 W.	Boy Scout Blvd, Suite 500)	
Date of filing/registration in Florida L10000034285	2. (a)	• • • • • • • • • • • • • • • • • • • •	_ (· — · — — —	-		-
3. Date of filing/registration in Florida 4. Document number 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) 1501 YAMATO ROAD SUITE 200 W BOCA RATON Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company NEW Registered Office Address: 1201 Hays Street Tallahassee FL Tallahassee FL 32301 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. Is Jill Cilmi Signature of a member or authorized representative of a member Printed or typed name of signee		Boca Raton, FL 33431	_	Tampa, F	FL 33607		
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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.	provision the obli- to mere	ons of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	performa for in C ereby co	ince of my a hapter 605, infirm that t	duties, and I am familiar v	vith and c	accent
Signature of Registered Agent Grace E. Kirby, Asst. Vice President	Signatur	<u> </u>	resident				