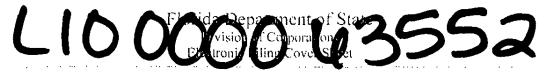
Page 1 of 1



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To:

Division of Corporations

Fax Number : (350) 617-6363

From:

Account Name : BEAN, READ, EMERTYN, BEGOLWORTH, CATCUARTON BURENTH, F.A. Account Number : 078077001702

Account Number : 078077001702 Phone (407)841-3260 Fax Number (407)423-1931

**Enter the email address for this business entity to be used for fulfire

annual report mailings. Enter only one email andress please. ** The Email Address: YIVI 1452 (CV Vestavice) Corre

LLC REGISTERED AGENT CHANGE VIERA CANCER CENTER LLC

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DEC 18 2015 J. HARRIS

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 linkted liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	ame of the limited liability company: VIERA CAP						
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 850 CENTURY MEDICAL DRIVE TITUSVILLE, FL 32796		(b) Mailing address of firsted liability company: (Note: MAY BE POST OFFICE BOX) P.O. BOX 2608				
			TITUSVILLE, FL 32781-2608				
	06/14/2010		L10000063	552			************
3.	Date of filing/registration in Florida	4.	Do	ocument nun	iber		····
5. (a)	Registered Agent and Registered Office shown on the records RICHARD M. LEVINE	of the Florida	Dept. of State:				
	Registered Office Address (MUST BE FLORIE A STREE	T ADDRESS	2				
	490 N WASHINGTON AVE				. ن ح دٍ	2815	
	TITUSVILLE	32796			r== : 	<u></u>	सम्बद्धाः
(b)	Enter name of NEW Registered Agent and/or NEW Register			AHASSEE TI	DEC 17 AH	Estate esta	
	DEAN MEAD SERVICES, LLC					Ö	5,
	NEW Registered Office Address: 800 N MAGNOLIA AVE., SUITE 1500				DH A	23	
	ORLANDO	_{FL} 32803					
the chaagent was/w the art dignal I here provis the obto mer notifie	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member ideas of organization or the operating agreement of the increof a member of authorized representative of a member by accept the appointment as registered agent and completed in the proper and competing at stantes relative to the proper and competing at the proper and competing the reflect a change in the registered office address, with writing of this change.	laws of the of the regi- liability or sof the limited in the perform the limited in the limited	State of Florics stered office at ompany, it is he ited liability coinpa Claudia Property in this capaciance of my dutance of my durance of the capaciance	nd the busine creby confirm ompany or a siny. Haines cinted or typed in the creek of the creek	Jones agree to agree to facilities facilities	of the the chaise pro	registere inge(s) vided in y with the and accep- seing files