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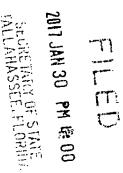
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PICK-UP WAIT MAIL					
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Special Instructions to Filing Officer:					
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K. SALY FEB - 1 2017



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: January 26, 2017

Order#: 463320/301

Re: MANATEE PHYSICIAN ALLIANCE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX __ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Grace Kirby c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

	me of the limited liability company: MANATEE PHYS	SICIAN A				
2. (a)	206 Second Street, East		(b) 367 S Gulph Road			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		IV	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Bradenton FL 34208	- -	King of P	russia, PA 19406		
	08/06/2010		L1000008	2739		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	C T Corporation System					
(b)	Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of State	:		
	1200 South Pine Island Road					
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		ZELLE TI		
	Plantation , FL_	33324		F. 30 L		
	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Company</u>	Office add	ress:	2017 JAN 30 PM TO DO TALLAHASSEE, FLORIDA		
	1201 Hays Street			2		
	NEW Registered Office Address:					
	Tallahassee , FL	32301				
the cha agent v was/we the arti	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cless of organization or the operating agreement of the liability of a member of authorized representative of a member oby accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have	the regist bility con the limi imited li Jill C	ered office mpany, it is ted liability ability com ilmi, Author	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. rized Person Printed or typed name of signce		
ĺχ	I'in writing of this change. No. 2 Kuby, re of Registered Agent Corporation Service Company	BY: Gr	ace E. Kir	by, Asst. Vice President		

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