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Y SULKER AUG 23 2019

## **COVER LETTER**

	sistration Section ision of Corporations							
SUBJECT:	Avenues Cancer Care Institute, LLC							
Sebuler.		e of Limited Lia	bility Company					
Dear Sir or	Madam:							
The enclose	d Registered Agent/Registered Offi	ce Change and fe	ve(s) are submitted for filing					
	The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please return	n all correspondence concerning thi	s matter to the fo	llowing:					
David P. (	Brigaltchik							
	Name of Person	<del></del>	-					
	Name of Person							
Grigaltchil	k & Galustov, P.A.							
	Firm/Company		-					
6144 Gaz	ebo Park Pl. S., #103							
	Address		-					
Jacksonvil	lle, FL 32257							
	City/State and Zip Code		-					
info@grigI	aw.com							
E-mail	address: (to be used for future annu	al report notifica	- ation)					
For further is	nformation concerning this matter, p	please call:						
David P. G	Prigaltchik	904 at (	738-8398					
	Name of Person		Area Code & Daytime Telephone Number					
Regi Divi Clift 2661	stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301	Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314					
Enclosed is a check for the following amount:								
<b>2</b> \$2	25 Filing Fee	<b>\$55</b>	Filing Fee & Certified Copy					

INHS18 (2/14)

## 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: Avenues Can	cer Ca	are	Institut	e, LLC 		·••	, <u> </u>		
2	(a)	6144 Gazebo Place South	(	ъ)	6144 G	azebo Park Place	Sout	h			
(	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
		Suite 104			Suite 10						
		Jacksonville, FL 32257	_		Jacksor	ville, FL 32257					
		03/18/2011		L	.110000	33268					
3.		Date of filing/registration in Florida	- 4.	_		Document number					
5.	(a)	David P. Grigaltchik									
J. (u)	()	Registered Agent and Registered Office shown on the records of 6144 Gazebo Park Place South	the Florio	da I	Dept. of Stat	e:					
		Registered Office Address (MUST BE FLORIDA STREET)	4DDRES	<u>:S)</u>		_					
		Suite 104					런	~			
		Jacksonville, FL	32257	7		_	SECTA NUMBER	3 A	-77		
(b	(b)	David P. Grigaltchik					AHASSEI	2819 AUG 16	<del></del>		
	` ′	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddr	ress:	_		<u>&gt;</u>	-		
		6144 Gazebo Park Place South			9# 9						
		NEW Registered Office Address:					C12-171	<u>.</u>			
		Suite 103				_					
		Jacksonville FL	32257	, 		_					
the ag wa	ent v ent v	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reg ability of the lin	ist con nut	ered offic npany, it i ed liabilit	e and the business of is hereby confirmed to ty company or as other	fice of hat the	the reg	gistered c(s)		
		ure of a member or authorized representative of a member	Ca —	ırlo	os A Ote	•					
						Printed or typed name of	_				
pre the to	ovisi e obl merc	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have a viriting of this change.	ree to ac perform d for in hereby c	et i nai Cl coi	n this cap nce of my hapter 60: nfirm that	pacity. I further agre duties, and I am fam 5, F.S. Or, if this doc the limited liability o	e to coi iliar wi cument compan	mply w ith and is hein iy has l	ith the accept g filed been		
S	ghatu	r of Registered Agent									