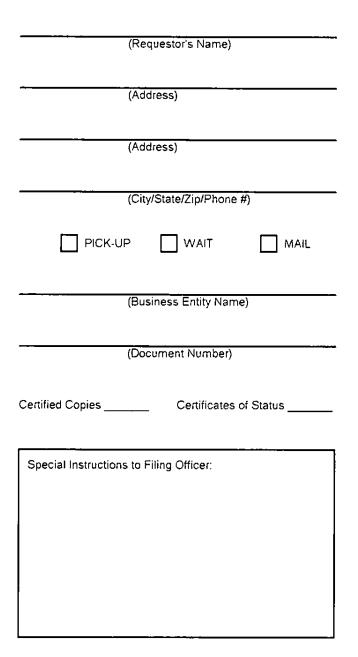
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Office Use Only



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CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscqlobal.com

Ext:

Date: 04/18/24 Order #: 1488530-1 Re: Cuals MD, LLC

Processing Method: In-House

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

I20000000195 Cost Limit: 25.00

AUTH Please take the following action:

File on a routine basis Issue proof of filing

Return evidence to the following:

ATTN: Amanda Miller

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

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

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	nme of the limited liability company: CUALS MD, LLC	;			
2. (a)	7000 SW 62 Avenue		(b) 1501 Yamato Road		
(,	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 545A	_		Suite 200	0 W
	South Miami, FL 33143	_		Boca Rat	on, FL 33431
	June 7, 2011		ŧ	_1100006	6513
3.	Date of filing/registration in Florida	4.	_		Document number
5. (a)	UPM Service Corp				
(,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State				- c:
	1501 Yamato Road				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2021	
(b)	Suite 200 W				2024 APR
	Boca Raton	33431		· -	
	, FL_				_
					P
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office ad		ess:	- <u>.</u> <u> </u>
					22
	Corporation Service Company				
	NEW Registered Office Address:		_		
	1201 Hays Street				_
	Tallahassee, FL_	32301			_
change agent w was/wo	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the liability.	registere bility co Tthe lim	ed om nit	office an pany, it is ed liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
/s/ Aaron Sudbury			or	Sudbury	, Member
Signature of a member or authorized representative of a member			_		Printed or typed name of signee
I herek provisi the obli to mere notified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I he I'm writing of this change.	e to act perform for in (ereby co	t ir an Ch on	this cape ce of my c apter 605 firm that	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00 CSC COA-4272

/s/ Lindsey M. Lockard Signature of Registered Agent Lindsey M. Lockard, Asst. Vice President on behalf of Corporation Service Company