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(Requestor's Name)	
- (Address)	
(Address)	
(City/State/Zip/Phone #)	
	_
PICK-UP WAIT	MAIL
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COVER LETTER

TO: Registration Section Division of Corporations	
Change of agent - Institute of Hes	althcare Professions
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Alan E Weinstein	
Name of Person	
Law Offices of Alan E Weinstein	
Firm/Company	
4500 Biscayne Blvd suite 203	•• :**•
Address	
Miami, Florida 33137	H H H
City/State and Zip Code	
defense1@bellsouth.net	(S) 5:
E-mail address: (to be used for future annual re	eport notification)
For further information concerning this matter, pleas	se call:
Karyn Vidal	561 202-6333
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amou	unt:
■ \$25 Filing Fee	☐ \$55 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.

	2300 South Congress Ave suite 105	Z1 .	2300 S	outh C	ongress	Ave s	suite 105
i) <u>_</u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) 2300 South Congress Ave suite 105 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Boynton Beach, Slorida 33426					
	Boynton Beach, Florida 33426						
	Date of filing/registration in Florida Jim Mathews	4.		Docum	nent num	ber	
ı)	Registered Agent and Registered Office shown on the records of the 3515 Viillage Blvd suite 205	Florida	Dept. of Sta	ate:			
	Registered Office Address (MUST BE FLORIDA STREET AD West Palm Beach, Fl 33409	DRESS	1			2016	
	, FL			_	The state of the s		
) _	Enter name of NEW Registered Agent and/or NEW Registered Office address:				SEE FLEADING	5 7)	i i i
	Alan E Weinstein				Ē,	<u>-</u> .	
	NEW Registered Office Address:			_	"ay Kad"	, ,	
	4500 Biscayne Blvd suite 203			_			
	Miami, Florida , FL	3137					
hai t w we rtic	mited liability company is not organized under the laws age or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limite of a member of authorized representative of a member	ne regis ility co the lim	stered offi ompany, it ited liabil iability co	ce and the is herebout ity comports of the interest of the int	ie busine: y confirn	ss officened that otherw	e of the regis the change(s vise provided
eb sic bli	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete po- gations of my position as registered agent as provided j ly reflect of change in the registered office address, I he in writing of this change	e to act erform for in C reby co	in this ca ance of my Chapter 60 onfirm tha	pacity. In the pacity of the pacity of the pacity of the limits of the l	l further (and I am Or, if this ited liabi	agree to familia s docun lity con	o comply with ir with and ac ient is being ipany has bei