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(Requestor's Name)

(Address)

(Address)

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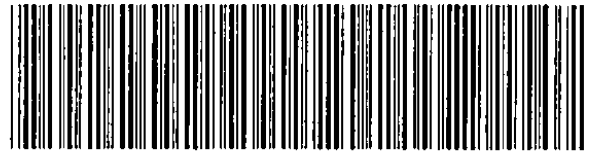
(Business Entity Name)

(Document Number)

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JAN 27 2003

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 414473 4306193
AUTHORIZATION : *Eyliena Baker*
COST LIMIT : \$ 25.00

ORDER DATE : January 26, 2023
ORDER TIME : 2:20 PM
ORDER NO. : 414473-005
CUSTOMER NO: 4306193

CHANGE OF AGENT

NAME: MILLS AVE ANESTHESIA LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mills Ave Anesthesia LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eileen C. Downes
Name of Person

Katten Muchin Rosenman LLP
Firm/Company

525 W. Monroe St. Ste. 1900
Address

Chicago, IL 60661
City/State and Zip Code

jlehr@magrudereye.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eileen C. Downes at (312) 577-8215
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$55 Filing Fee & Certified Copy

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. Name of the limited liability company: Mills Ave Anesthesia LLC

2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1911 N. Mills Ave. Orlando, FL 32803 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

3. Date of filing/registration in Florida: 12/29/2021 4. Document number: M21000017700

5. (a) Saltsman, Robert P Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 222 S Pennsylvania Ave, Suite 200 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Winter Park, FL 32789

(b) Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address: 1201 Hays Street NEW Registered Office Address: Tallahassee, FL 32301

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

DocuSigned by: Michael Wilson Signature of member or authorized representative of a member Michael Wilson Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Eyleina Baker Assistant Vice President Signature of Registered Agent