L11000 140 297

(R	Requestor's Name)	
(A	Address)	
(A	Address)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B	Business Entity Name)	
(0	Occument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to Fil	ling Officer:	

Office Use Only



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RECEIVE

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

ACCOUNT NO. : I2000000195							
REFERENCE : 170093/18183052	ノ						
AUTHORIZATION :							
COST LIMIT : \$ 25.00							
ORDER DATE : December 5, 2023	•						
ORDER TIME : 9:36 AM	, -						
ORDER NO. : 170093-315							
CUSTOMER NO: 8183052							
CHANGE OF AGENT							
NAME: WOMENCARE OF BALDWIN PARK, LLC							
MAIL. HONDINGARD OF DAIDHIN PARK, DDC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY							
XX PLAIN STAMPED COPY							
CONTACT PERSON: Eyliena Baker EXT#							
•							
EXAMINER:							

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	me of the limited liability company: WOMENCAR	RE OF B	ALD	WIN PARK	K, LLC
2. (a)	930 LAKE BALDWIN LANE		(b) 4010 W. Boy Scout Blvd, Suite 500		
(., .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		ORLANDO, FL 32814			, Tampa, I	FL 33607
		12/14/2011		_	L11000140	0297
3.		Date of filing/registration in Florida	4.			Document number
5. ((a)					_
		Registered Agent and Registered Office shown on the records UPM Service Corp		orida	Dept. of State	· · · · · · · · · · · · · · · · · · ·
		Registered Office Address (MUST BE FLORIDA STREET	ET ADDR	ESS)		•
1501 YAMATO ROAD SUITE 200 W						-
		BOCA RATON	FL_334	31		•
						••
(1	b) .					<u> </u>
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registe</u>	red Offic	e add	ress:	
		Corporation Service Company				
		NEW Registered Office Address:				•
		1201 Hays Street				
		Tallahassee	3230 FL	D 1		
chan agen was/	ge t w	mited liability company is not organized under the or changes are made, the Florida street address of taill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the member eles of organization or the operating agreement of the	he regis liability s of the	tered con limi	l office and npany, it is ted liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		/s/ Jill Cilmi		Jill C	ilmi, Author	rized Person
Sig	nati	are of a member or authorized representative of a member				Printed or typed name of signee
prov the c to m	isio bli ere	y accept the appointment as registered agent and a ons of all statutes relative to the proper and comple gations of my position as registered agent as provid by reflect a change in the registered office address, in writing of this change.	igree to te perfo ded for t I hereb	act i rmai in Cl v cor	n this capa ace of my d apter 605, afirm that th	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
	_	Drace Cokubly	Grace	E. K	Cirby, Asst.	Vice President
Sign	atur	e of Registered Agent				