L1200000 66070

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





200348946732

____07/27/20--01037--022 **25.00

RECEIVED
JUL 2 3 2020

SECRETARY OF SEMI

D. BRUCE SER 13 MM



CSC - WILMINGTON
251 Little Falls Drive
Wilmington . De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: July 21, 2020

Order#: 345704/006

Re: BAPTIST HEALTH INTERNATIONAL SERVICES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Erika Zavala Daza

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

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

INCA.XCOA

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. N	ame of the limited liability company:	TH INTER	RNATIONAL SERVICES, LLC
2. (a)	6855 RED ROAD, SUITE 600	(b)	6855 RED ROAD, SUITE 600
2. (u)	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)
	CORAL GABLES, FL 33143	_	CORAL GABLES, FL 33143
	01/12/2012		L12000006670 PG
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	FRIEDMAN, DAVID RESQ		
<i>J.</i> (2)	Registered Agent and Registered Office shown on the records of 6855 RED ROAD, STE. 600	the Florida	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		THE G
	CORAL GABLES . FL	33143	
	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee, FL	32301	
agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registered ability cor of the limi	ed office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
	Lie E. Clanie	Jill C	Cilmi, Authorized Person
_	ture of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided elv reflect a change in the registered office address, I is din writing of this change.	ree to act i performa d for in Co hereby co	in this capacity. I further agree to comply with the ince of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed infirm that the limited liability company has been
	ire of Registered Agent		

Grace E. Kirby, Asst. Vice President of Corporation Service Company